## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000146549

Entity Name: VIDEO PARADISE OF SW FLORIDA INC.

FILED May 29, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
1305 NE 3 CAPE CO	BRD TER RAL, FL 33909			
Current N	lailing Address:	New Mailing Address	New Mailing Address:	
1217 E CAPE CORAL PKWY UNIT 116 CAPE CORAL, FL 33904		1305 NE 3RD TER CAPE CORAL, FL 339	1305 NE 3RD TER CAPE CORAL, FL 33909	
FEI Number	: FEI Number Applied For	( ) FEI Number Not Applicable (X)	Certificate of Status Desired ( )	
Name and	d Address of Current Registered Ag	ent: Name and Address o	f New Registered Agent:	
The above	BRD TER RAL, FL 33909 US	or the purpose of changing its registered	d office or registered agent, or both,	
SIGNATU				
01011/110	Electronic Signature of Registe	red Agent	Date	
	nce with s. 607.193(2)(b), F.S., the corporation			
OFFICERS AND DIRECTORS:		` '	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) Delete LYNCH, JAMES M 1305 NE 3RD TER CAPE CORAL, FL 33909	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Delete LYNCH, KAREN L 1305 NE 3RD TER CAPE CORAL, FL 33909	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SEC ( ) Delete LYNCH, JAMES M 1305 NE 3RD TER CAPE CORAL, FL 33909	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TREA () Delete LYNCH, KAREN L 1305 NE 3RD TER CAPE CORAL, FL 33909	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES LYNCH PRES 05/29/2007