

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 23, 2007 8:00 am**  
**Secretary of State**

03-23-2007 90010 019 \*\*\*158.75

DOCUMENT # P05000073013

1. Entity Name  
DIGITAL MUSIC VIDEO NETWORKS, INC.



Principal Place of Business  
11077 BISCAYNE BLVD #200  
MIAMI, FL 33161

Mailing Address  
11077 BISCAYNE BLVD #200  
MIAMI, FL 33161

40039958



02272007 No Chg-P CR2E034 (1/1/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2863824

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

JACOBI, ALLEN L  
11077 BISCAYNE BLVD #200  
MIAMI, FL 33161

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	ROBINSON, RUSSELL J
STREET ADDRESS	257 S LAKE DESTINY DR200
CITY-ST-ZIP	ORLANDO, FL 32810
TITLE	D
NAME	WERNER, PETER A
STREET ADDRESS	257 S LAKE DESTINY DR200
CITY-ST-ZIP	ORLANDO, FL 32810
TITLE	D
NAME	JACOBI, ALLEN L
STREET ADDRESS	11077 BISCAYNE BLVD #200
CITY-ST-ZIP	MIAMI, FL 33161
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-07

Date

407-  
331-3600

Daytime Phone #