## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000086852

Entity Name: BM AUDIOVISUAL SOLUTIONS CORPORATION

FILED Sep 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13011 NW 1ST STREET 9050 PINES BOULEVARD

NO 212 NO 415

HOLLYWOOD, FL 33028 PEMBROKE PINES, FL 33024

Current Mailing Address: New Mailing Address:

13011 NW 1ST STREET 9050 PINES BOULEVARD

NO 212

NO 415

DEMPROVE DINES EL 2202

HOLLYWOOD, FL 33028 PEMBROKE PINES, FL 33024

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARTINEZ, MARIA
13011 NW 1ST STREET
MARTINEZ, MARIA
9050 PINES BOULEVARD

NO 212 NO 415
HOLLYWOOD, FL 33028 US PEMBROKE PINES, FL 33024 US

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.

SIGNATURE: DAVID ALICEA 09/25/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: BRAVO, RAFAEL P (X) Change ( ) Addition Name: BRAVO, RAFAEL

 Name:
 BRAVO, RAFAEL
 Name:
 BRAVO, RAFAEL

 Address:
 13011 NW 1ST STREET
 Address:
 9050 PINES BOULVARD

 City-St-Zip:
 HOLLYWOOD, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33024

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: MARTINEZ MARIA Name: MARTINEZ MARIA

 Name:
 MARTINEZ, MARIA
 Name:
 MARTINEZ, MARIA

 Address:
 13011 NW 1ST STREET
 Address:
 9050 PINES BOULEVARD

 City-St-Zip:
 HOLLYWOOD, FL 33028
 City-St-Zip:
 PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIA MARTINEZ VP 09/25/2006