

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122078

Entity Name: VIVIDSTREAM INC.

FILED  
Mar 29, 2007  
Secretary of State

## Current Principal Place of Business:

400 ILLINOIS AVE ST  
CLOUD, FL 34769

## New Principal Place of Business:

400 ILLINOIS AVE  
SAINT CLOUD, FL 34769

## Current Mailing Address:

400 ILLINOIS AVE ST  
CLOUD, FL 34769

## New Mailing Address:

400 ILLINOIS AVE  
SAINT CLOUD, FL 34769

FEI Number: 61-1509831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SUTTER, BERNARD R  
1207 ILLINOIS AVE  
ST CLOUD, FL 34769 US

## Name and Address of New Registered Agent:

SUTTER, BERNARD R  
1207 ILLINOIS AVE  
SAINT CLOUD, FL 34769 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:

03/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ALESICH, CHRISTOPHER  
Address: 400 ILLINOIS AVE ST  
City-St-Zip: CLOUD, FL 34769

Title: DV ( ) Delete  
Name: ALESICH, ROBYN  
Address: 400 ILLINOIS AVE ST  
City-St-Zip: CLOUD, FL 34769

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ALESICH, CHRISTOPHER R  
Address: 400 ILLINOIS AVE  
City-St-Zip: SAINT CLOUD, FL 34769

Title: DV (X) Change ( ) Addition  
Name: ALESICH, ROBYN M  
Address: 400 ILLINOIS AVE  
City-St-Zip: SAINT CLOUD, FL 34769

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: CHRISTOPHER R ALESICH

DP

03/29/2007

Electronic Signature of Signing Officer or Director

Date