

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000145019

FILED
Apr 18, 2007
Secretary of State

Entity Name: REMOTE VISIONS-FLORIDA, INC.

Current Principal Place of Business:

621 NW 53RD STREET
240
BOCA RATON, FL 33487

New Principal Place of Business:

1912 GRAND AVE
SAN RAFAEL, CA 94901 US

Current Mailing Address:

1912 GRAND AVE
SAN RAFAEL, CA 94901-192

New Mailing Address:

1912 GRAND AVE
SAN RAFAEL, CA 94901 US

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

Name and Address of Current Registered Agent:

BUSINESS FILINGS, INCORPORATED
123 GOVERNOR'S SQUARE BLVD
101
TALLAHASSEE, FL 32301-296 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONTGOMERY, THOMAS E III
Address: 1912 GRAND AVE.
City-St-Zip: SAN RAFAEL, CA 94901 US

Title: S, T () Delete
Name: BEAUVAIS, CHERYL G
Address: 1912 GRAND AVE.
City-St-Zip: SAN RAFAEL, CA 94901

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MONTGOMERY, THOMAS III
Address: 1912 GRAND AVE
City-St-Zip: SAN RAFAEL, CA 94901 US

Title: V (X) Change () Addition
Name: MONTGOMERY, THOMAS
Address: 1912 GRAND AVE
City-St-Zip: SAN RAFAEL, CA 94901

Title: D () Change (X) Addition
Name: MONTGOMERY, THOMAS
Address: 1912 GRAND AVE
City-St-Zip: SAN RAFAEL, CA 94901

Title: S () Change (X) Addition
Name: BEAUVAIS, CHERYL
Address: 1912 GRAND AVE.
City-St-Zip: SAN RAFAEL, CA 94901

Title: T () Change (X) Addition
Name: BEAUVAIS, CHERYL
Address: 1912 GRAND AVE.
City-St-Zip: SAN RAFAEL, CA 94901

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: T.E. MONTGOMERY III

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date