2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0700000139

Entity Name: DISTRIBUTION VIDEO & AUDIO, INC

FILED Jan 11, 2008 Secretary of State

Entity Nar	me: DISTRIB	UTION VIDEO & AUDIO, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
133 CAND PALM HAF	Y LANE RBOR, FL 346	683					
Current Mailing Address:			New Maili	New Mailing Address:			
133 CAND PALM HAF	Y LANE RBOR, FL 346	683					
FEI Number:	: 52-2216786	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:		
KUGLER, 133 CAND PALM HAF		683 US					
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered Age	ent		Date		
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DPCE (KUGLER, BRA 2949 LANDMA PALM HARBOI	RK WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DST (KUGLER, RYA 4111 RIVERSI BURBANK, CA	DE DR #305	Title: Name: Address: City-St-Zip:	DST (2 KUGLER, RY/ 4111 W ALAM BURBANK, CA	1EDA #305		
Title: Name: Address: City-St-Zip:	D (KUGLER, BEN 2852 CHELSE S CLEARWATI	A PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	D (JOHNSON, AN) Delete DREW	Title: Name:	D (X	X) Change ()Addition NDREW		

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.

Address:

City-St-Zip:

SIGNATURE: BRAD KUGLER DPCE 01/11/2008

10061 RIVERSIDE DR #740

City-St-Zip: N HOLLYWOOD, CA 91602

Address:

10061 RIVERSIDE DR #740

TOLUCA LAKE, CA 91602