

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000118171

FILED
Mar 27, 2008
Secretary of State

Entity Name: MASTER VISION CONNECTIONS, INC

Current Principal Place of Business:

3074 BAY LAUREL CIRCLE N
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

3074 BAY LAUREL CIRCLE N
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 26-1328878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINAL, LUCIA M
3074 BAY LAUREL CIRCLE N
KISSIMMEE, FL 34744 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: ESPINAL, LUCIA M
Address: 3074 BAY LAUREL CIRCLE N
City-St-Zip: KISSIMMEE, FL 34744

Title: S () Delete
Name: GONZALEZ, MYRNA E
Address: 2713 NATTIE COURT
City-St-Zip: ORLANDO, FL 32826

Title: T/B () Delete
Name: ROMERO, JUANA
Address: 1704 SPRUCEWOOD LANE
City-St-Zip: ORLANDO, FL 32818

Title: BD/B () Delete
Name: SOTO, ALEXA
Address: 511 ELDRON AVE
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: ESPINAL, LUCIA M
Address: 3074 BAY LAUREL CIRCLE N
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Change () Addition
Name: CORTORREAL, ANDRES
Address: 3139 VIA OTERO DR
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Change () Addition
Name: CORTORREAL, MARIA
Address: 6470 TIFTON PL
City-St-Zip: ORLANDO, FL 32818

Title: D (X) Change () Addition
Name: SOTO, ALEXA
Address: 511 ELDRON AVE
City-St-Zip: DELTONA, FL 32807

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.

SIGNATURE: LUCIA M ESPINAL

P/D

03/27/2008

Electronic Signature of Signing Officer or Director

Date