2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2009
Secretary of State

DOCUMENT# P08000017046

Entity Name: ULTIMATE AV, INC.

Current Principal Place of Business:

17365 S.W 8TH ST
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

48 GABLES BLVD
WESTON, FL 33326 US

Current Mailing Address:

17365 S.W 8TH ST
PEMBROKE PINES, FL 33029 US

New Mailing Address:

48 GABLES BLVD
WESTON, FL 33326 US

FEI Number: 26-1981987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST.
SUITE 500
ORLANDO, FL 32804 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

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:

Title: PSD ( ) Delete
Name: SCHINDLER, DAVID
Address: 17365 S.W 8TH ST
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: V ( ) Delete
Name: CAVE, PETER
Address: 2050 N.E 199 ST
City-St-Zip: N.MIAMI BEACH, FL 33160 US

Title: T (X) Delete
Name: SCHINDLER, BIRGITTA
Address: 17365 S.W 8TH ST
City-St-Zip: PEMBROKE PINES, FL 33029 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: SCHINDLER, DAVID
Address: 48 GABLES BLVD
City-St-Zip: WESTON, FL 33326 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DAVID H.SCHINDLER PSD 08/20/2009

Electronic Signature of Signing Officer or Director Date