

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000011121

FILED
Apr 24, 2008
Secretary of State

Entity Name: NEW PRO VIDEO SYSTEMS INC.

Current Principal Place of Business:

27 OLD ENGLISH DR
CHARLESTON, SC 29407 US

New Principal Place of Business:

3546 ADMIRAL DRIVE
NORTH CHARLESTON, SC 29405 US

Current Mailing Address:

3546 ADMIRAL DRIVE
NO. CHARLESTON, SC 29405 US

New Mailing Address:

3546 ADMIRAL DRIVE
NORTH CHARLESTON, SC 29405 US

FEI Number: 65-0376613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAIZEL, ROBERT
9360 SUNSET DR
200
MIAMI, FL 33173 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: HOLLER, BARBARA J
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407 US

Title: V () Delete
Name: HOLLER, DELORES D
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407 US

Title: T () Delete
Name: QUEVEDO, ALFONSO A
Address: 27 OLD ENGLISH DRIVE
City-St-Zip: CHARLESTON, SC 29407 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: RUTHERFORD, AUSTIN L
Address: 27 OLD ENGLISH DRIVE
City-St-Zip: CHARLESTON, SC 29407 US

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: BARBARA J. HOLLER

BH

04/24/2008

Electronic Signature of Signing Officer or Director

Date