

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
May 11, 2009
Secretary of State**

DOCUMENT# P93000017872

Entity Name: ERDMAN VIDEO SYSTEMS, INC.

Current Principal Place of Business:

8895 SW 129 STREET
MIAMI, FL 33176

New Principal Place of Business:

8895 SW 129TH STREET
MIAMI, FL 331765918 US

Current Mailing Address:

8895 SW 129 STREET
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0393948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERDMAN, M R
8895 SW 129 STREET
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

ERDMAN, M R
8895 SW 129TH STREET
MIAMI, FL 331765918 US

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: _____ 05/11/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ERDMAN, M R
Address: 8895 SW 129 STREET
City-St-Zip: MIAMI, FL 33176

Title: PV () Delete
Name: ERDMAN, M R
Address: 8895 SW 129 STREET
City-St-Zip: MIAMI, FL 33176

Title: TS () Delete
Name: WEAVER, CHRISTINE M
Address: 8895 SW 129 STREET
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ERDMAN, M R
Address: 8895 SW 129TH STREET
City-St-Zip: MIAMI, FL 331765918 US

Title: V (X) Change () Addition
Name: LORENZO, CARLOS E
Address: 8895 SW 129 STREET
City-St-Zip: MIAMI, FL 331765918 US

Title: TS (X) Change () Addition
Name: MALINGUAGGIO, NICHOLAS
Address: 8895 SW 129TH STREET
City-St-Zip: MIAMI, FL 331765918 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: M. RUSTIN ERDMAN PD 05/11/2009
Electronic Signature of Signing Officer or Director Date