

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P93000024922

1. Entity Name  
NOW SHOWING VIDEO, INC.



Principal Place of Business  
271 KEY DEER BLVD  
BIG PINE KEY, FL 33043 US

Mailing Address  
271 KEY DEER BLVD  
BIG PINE KEY, FL 33043 US



02072006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0394794

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CAVATIO, PETER W  
RT. 5 BOX 14  
BIG PINE KEY, FL 33043

**DO NOT WRITE  
IN THIS SPACE**

8. The above entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of the registered agent.

SIGNATURE

\_\_\_\_\_  
Signed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CAVATAIO, PETER
STREET ADDRESS	30856 MINORCA DR
CITY - ST - ZIP	BIG PINE KEY, FL
TITLE	D
NAME	CAVATAIO, ANTHANIA
STREET ADDRESS	30856 MINORCA DR
CITY - ST - ZIP	BIG PINE KEY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000453766  
03/14/06 80034-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Peter W Cavanaugh* (PETER W CAVATAIO)

Date

Daytime Phone #

3-1-06 305-672-15