2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 13, 2004 8:00 am Secretary of State

DOCUMENT # P94000085255 1. Entity Name DIGITAL VIDEO SYSTEMS, INC.						1	01-13-2004 9	90025 010	***150.	.00	
Principal Place of Business Mailing Address											
8280 NW 27TH ST 8280 NW 27TH ST								•.			
503/504 503/504			Ji				•	•			
MIAMI, FL 33122 MIAMI, FL 33122								II (C+E+ AII)			
										!! !	
2. Principal Place of Business		3. Mailing Address					III. BURUL BRUK BRUK BRUK				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			0109	92004	Chg-P	CR2E03	4 (10/03)		
City & State		City & State			A FF	Number			I IAni	olied For	
					L.	9-1578	363			Applicable	
Zip	Country	Zip Coun		try	5. Certificate of Status Desire			\$8.75 Additional Fee Required			
— C. Normand Address of Course											
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
TYSON, BARBARA					io no						
8280 NW 27TH ST					Street Address (P.O. Box Number is Not Acceptable)						
STE 503/504									·		
MIAMI, FL 33122											
			_	City				FL	Zip Code	'	
8. 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. I am familiar with, and accept											
the obligations of registered agent.											
· SIGNATURE											
Signature, typed 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, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees											
10.	OFFICERS AND	DIRECTORS	11.		ADD	ITIONS/C	HANGES TO OFF	ICERS AND I	DIRECTORS	IN 11	
TITLE	PD	☐ Delete	TITL						Change	Addition	
NAME OWNER ADDRESS	TYSON, JERROLL R		NAM	_	8280 N	W 27	174ST. SI	E 503	•		
STREET ADDRESS CITY-ST-ZIP	3700 N.W. 114 AVENUE MIAMI, FL: 33178			ET ADDRESS -ST-ZIP	MIAM	1 6	. 33127				
TITLE	STD	☐ Delete	TITL		7 11/7/21	7			Change	Addition	
NAME	TYSON, BARBARA	□ Delete	NAM		(= 0 = 1	1, , / 5-	ITH ST. S	TE TA	Glialige	☐ Addition	
STREET ADDRESS	3700 N.W. 114 AVENUE		STRE	ET ADDRESS	8780 N	W 61	114 21 . 3	16/0	,		
CITY-ST-ZIP	MIAMI, FL 33178		CITY				33122				
TITLE ,	VP	Delete	- TITL	E =		-	TH ST. 5	3	Change :	☐ Addition	
NAME	NECUZE, JORGE		NAM	lE .	8780 N	IW VI	TH ST. S	1E 103	-		
STREET ADDRESS CITY-ST-ZIP	3700 N.W. 114 AVENUE MIAMI, FL 33178		1	ET ADDRESS -ST-ZIP	MIMI	, FL	3>122	_			
TITLE	VP	По-н-	TITL						Change	Addition	
NAME	GONGORA, ANTONIO	L Delete	NAM						Change	Addition	
STREET ADDRESS	3700 N.W. 114 AVENUE		1	ET ADDRESS	8280 ^	IWZ	TTH ST.	21870	13		
CITY-ST-ZIP	MIAMI, FL 33178		CITY	-ST-ZIP	MIAMI	, H	3312				
TITLE	VP	☐ Delete	TITL	Ε	XP				Change	☐ Addition	
NAME	PINODA, RAFAEL		NAM	,	PINE	$PA_{j}/2$	AFAEL				
STREET ADDRESS CITY-ST-ZIP	3700 NW 114 AVE MIAMI, FL 33178			ET ADORESS -ST-ZIP	8280	VWZ	IST, STE	103			
TITLE	NIAWII, FL 33176	Delete -	TITL		MINI	<u> </u>	L 33/1		Change	☐ Addition	
NAME		La Delete	~ NAN	- 1		• • •			onenge	nouldon	
STREET ADDRESS		D &		EET ADDRESS							
CITY-ST-ZIP			CITY	'-ST-ZIP		_					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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											

of the corporation of the receiver of trustee empowered to execute ris report as required by Chapter 507, Florida Statutes; and that rhy name appears in Block 10 of Block 11 in changed, or on an attachment with an address, with all other like impowered.

SIGNATURE:

| Chapter 507 | 12 | 04 | (786) 33 | -255