

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000061302

Entity Name: HOME THEATER CONCEPTS, INC.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

6900 PHILLIPS HWY  
STE 3  
JACKSONVILLE, FL 32216 US

## New Principal Place of Business:

3832-10 BAYMEADOWS ROAD  
STE 154  
JACKSONVILLE, FL 32217 US

## Current Mailing Address:

3832-10 BAYMEADOWS ROAD  
STE 154  
JACKSONVILLE, FL 32217 US

## New Mailing Address:

FEI Number: 59-3391826      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, ROBERTO L  
500 BASSWOOD COURT  
JACKSONVILLE, FL 32259 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: MORALES, ROBERTO L MR.  
Address: 500 BASSWOOD COURT  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Delete  
Name: MORALES, EDUARDO J MR.  
Address: 12555 LEASURE LANE  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Delete  
Name: MORALES, MAUREEN N MRS  
Address: 500 BASSWOOD COURT  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERTO L. MORALES

P

03/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date