

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000094716

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** LAS VEGAS ARTISTS INTERNATIONAL, INC.

**Current Principal Place of Business:**

663 AVE I NW  
WINTER HAVEN, FL 33881 US

**New Principal Place of Business:**

1000 SIERA PARK BLVD. W  
CELEBRATION, FL 34747 US

**Current Mailing Address:**

1101 MIRANDA LANE  
KISSIMMEE, FL 347410769 US

**New Mailing Address:**

**FEI Number:** 59-3414604      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SWART, BAUMRUK & COMPANY, LLP  
717 EAST OAK STREET  
KISSIMMEE, FL 34744 US

**Name and Address of New Registered Agent:**

SWART, BAUMRUK & COMPANY, LLP  
1101 MIRANDA LANE  
KISSIMMEE, FL 34741 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: \_\_\_\_\_

01/07/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: BRYANT, SHAWN I  
Address: 663 AVE I NW  
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: S ( ) Delete  
Name: KOVALIC, LESLIE  
Address: 663 AVENUE I NW  
City-St-Zip: WINTER HAVEN, FL 33881

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: BRYANT, SHAWN I  
Address: 1000 SIERA PARK BLVD. W  
City-St-Zip: CELEBRATION, FL 34747 US

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: SHAWN I. BRYANT

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date