

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000000600

FILED
Apr 18, 2009
Secretary of State

Entity Name: MOVIE, TELEVISION, & GRAPHICS CORP.

Current Principal Place of Business:

11010 NW 30TH ST STE 104
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

CCS 18277
P.O BOX 025323
MIAMI, FL 33102

New Mailing Address:

FEI Number: 65-0886796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: PD () Delete
Name: JARAMILLO, JOSE
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

Title: SD () Delete
Name: DELGADO, BETTY
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

Title: VD () Delete
Name: CASAS, GABRIEL F
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

Title: TD () Delete
Name: CHALMETA, JULIO
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: GENTILE, MICHELLE
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: GENTILE, MIRIAM P
Address: P.O BOX 025323
City-St-Zip: MIAMI, FL 33102

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:

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: JOSE JARAMILLO

MGR

04/18/2009

Electronic Signature of Signing Officer or Director

_____ Date