


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90168 027 \*\*\*150.00

<b>DOCUMENT # P99000076978</b> 1. Entity Name <b>A-1 TV INCORPORATED</b>			
Principal Place of Business <b>7510 THOMAS DRIVE STE B PANAMA CITY BEACH, FL 32408</b>		Mailing Address <b>7510 THOMAS DRIVE STE B PANAMA CITY BEACH, FL 32408</b>	
2. Principal Place of Business <b>2525 Allison Ave.</b> Suite, Apt. #, etc.		3. Mailing Address <b>2525 Allison Avenue</b> Suite, Apt. #, etc.	
City & State <b>Panama City Beach, FL</b> Zip <b>32408</b> Country <b>U.S.A.</b>		City & State <b>Panama City Beach, FL</b> Zip <b>32408</b> Country <b>U.S.A.</b>	
4. FEI Number <b>59-3600257</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>HEBERT, JOHN G 7510 THOMAS DRIVE STE B PANAMA CITY BEACH, FL 32408</b>		7. Name and Address of New Registered Agent Name <b>John G. Hebert</b> Street Address (P.O. Box Number is Not Acceptable) <b>2525 Allison Avenue</b> City <b>Panama City Beach</b> <b>FL</b> Zip Code <b>32408</b>	
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 <u><i>John Hebert</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u><b>4-5-05</b></u> <small>(NOTE: Registered Agent signature required when reissuing)</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HEBERT, JOHN G</b> <b>7510 THOMAS DRIVE</b> <b>PANAMA CITY BEACH, FL 32408</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>John G. Hebert</b> <b>2525 Allison Avenue</b> <b>Panama City Beach, FL 32408</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: <u><i>John Hebert</i></u> <b>John Hebert</b>		Date <u><b>4-5-05</b></u> Daytime Phone # <u><b>850-235-3339</b></u>	