

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 852547 (9)

1. Corporation Name  
**COMSAT VIDEO ENTERPRISES, INC.**



Principal Place of Business: 6560 ROCK SPRING DRIVE, BETHESDA MD 20817-1146, US  
Mailing Address: 6560 ROCK SPRING DRIVE, BETHESDA MD 20817-1146, US

3. Date Incorporated or Qualified: 04/12/1982  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 62-1057643  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324  
10. Name and Address of New Registered Agent (81-84) fields: Name, Street Address (P.O. Box Number is Not Acceptable), City, State (FL), Zip Code.

11. Pursuant to the provisions of Sections 607.0532 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 637.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD CROCKETT, BRUCE L 6560 ROCK SPRING DRIVE BETHESDA MD	1.1 TITLE	D FLOWER, ALLEN E. 6560 ROCK SPRING DRIVE BETHESDA, MD 20817-1146
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D FAULDERS, C. THOMAS III 6560 ROCK SPRING DRIVE BETHESDA MD	2.1 TITLE	V MYER, ROBERT C. 6560 ROCK SPRING DRIVE BETHESDA, MD 20817-1146
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V STORY, STEVEN E 6560 ROCK SPRING DRIVE BETHESDA MD	3.1 TITLE	V AARON, ARTHUR M. 6560 ROCK SPRING DRIVE BETHESDA, MD 20817-1146
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	PD LYONS, CHARLES 6560 ROCK SPRING DRIVE BETHESDA MD	4.1 TITLE	V MINAMI, WESLEY D. 6560 ROCK SPRING DRIVE BETHESDA, MD 20817-1146
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	S WEBER, NANCY E. 6560 ROCK SPRING DRIVE BETHESDA MD	5.1 TITLE	ASSISTANT S GREGG III, CHARLES N. 6560 ROCK SPRING DRIVE BETHESDA, MD 20817-1146
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D MARIO, RONALD J. 6560 ROCK SPRING DRIVE BETHESDA MD	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nancy E. Weber Nancy E. Weber, Secretary Date: \_\_\_\_\_ 301-214-3000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)