

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 # 265548

(8)

1. Corporation Name

A & T VIDEO/DELTA T.V., INC.



Principal Place of Business

8741 SW 129 ST
MIAMI FL 33176

Mailing Address

8741 SW 129 ST
MIAMI FL 33176

3. Date Incorporated or Qualified

12/27/1962

3a. Date of Last Report

05/25/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1026737

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEKER, ANTHONY
12481 SW 191 ST
MIAMI FL 33177

81 Name

Anthony Seker, II

82 Street Address (P.O. Box Number is Not Acceptable)

8745 S.W. 183 Terr.

83

84 City

Miami

FL

85 Zip Code

33157

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 607.0505, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME SEKER, ANTHONY
STREET ADDRESS 12481 SW 191 ST
CITY- ST- ZIP MIAMI, FL 00000 ☒ DELETE

1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP
delete completely ☐ Change ☐ Addition

TITLE SDT
NAME SEKER, ETIA
STREET ADDRESS 12481 SW 191 STREET
CITY- ST- ZIP MIAMI, FL 00000 ☐ DELETE

2.1 TITLE V-S-T-D
22 NAME Etta Seker
23 STREET ADDRESS 12481 SW 191 ST.
24 CITY- ST- ZIP Miami, FL 33177 ☒ Change ☐ Addition

TITLE VD
NAME SEKER, ANTHONY II
STREET ADDRESS 8745 S.W. 183RD TERRACE
CITY- ST- ZIP MIAMI FL ☐ DELETE

3.1 TITLE President & Director
32 NAME Anthony Seker, II
33 STREET ADDRESS 8745 S.W. 183 Terr.
34 CITY- ST- ZIP Miami, FL 33157 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

4.1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

5.1 TITLE 100001794021
52 NAME -04/25/96--01023--027
53 STREET ADDRESS ***200.00
54 CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ DELETE

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-20-96

Daytime Phone #

(305) 233-6231

CR2E034 (12/95)