## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

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DOCUMENT # 539302 CHUCK'S T.V., INC. Mailing Address Principal Place of Business 703 S. FEDERAL HIGWAY 703 S. FEDERAL HIGWAY POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3a. Date of Last Report 3. Date Incorporated or Qualified 07/13/1977 04/18/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1753956 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country 8. This corporation has liability for intangible tax under s. 199.032, Country Yes 🔲 No Florida Statutes 29 30 24 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name WEBSTER, FRED 1760 SE 21 AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 POMPANO BEACH FL 33062 83 84 Zip Code 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, typied or printed name of registered agent and title if applicable (NOTE Registered Agent aignature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN >22 12. 13. Change Addition DELETE TITLE 1 1 TITE NAME WEBSTER, FRED 1.2 NAME 1760 SE 21 AVE 1.3 STREET ADDRESS STREET ADDRESS 33062 POMPANO BCH FL 1.4 CITY-ST-ZIP CHY-ST-ZIP Addition DELETE TITLE 21 TITLE NAME WEBSTER, KAREN 2.2 NAME 1760 SE 21 AVE 2.3 STREET ADDRESS STREET ADORESS 3306Q POMPANO BCH, FL 00000 2. 4 CITY-ST-ZIP CHY-S1-ZIE Addition DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIF DELETE Change Addition 4.1 TITLE THEF 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP City-St-Zié DELETE Addition 6.1 TITLE TITLE 62 NAME NAME **6.3 STREET ADDRESS** STREET AODRESS

14. I do hereby certify that the information of period 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 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 this perpetation 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 it changed, or on an attachment with an address. SIGNATURE

CHY-St-ZiP

FREDERIC 5. Webster

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FILED

Apr 01 1997 8:00am

Secretary of State