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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

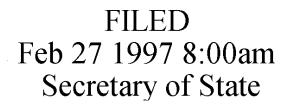
DOCUMENT # 551232

(2)

VIDEO DESIGNS, INC.

g Address

3801 APALACHEE PKWY.





TALLAHASSEE FL 32311  2. Principal Place of Business		TALLAHASSEE FL 32311-4103						
					3. Date Incorporated or Qualified 11/15/1977	1	ate of Las 01/199	
		28. Mailing Address		4. FEI Number			Applied For	
21		26			59-1803060			Not Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Stat	(-	Oity & State			Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees
Zip <b>24</b>	Gountry 25	Zip	Count	У	8. This corporation has liability for in Florida Statutes	ntangible Yes		я s. 199.032,
<u></u>	9. Name and Address of Curre		100		10. Name and Address of New Re	gistered	Agent	
PFT	TH, JOHN A.		В	1 Name				
	72 TUNG GROVE ROAD		8	Street Ac	Idress (P.O. Box Number is Not Acceptab	le)		
	LAHASSEE FL 32311		0.	E GUECI AC	idress (F.O. Box Natificor la Not Neceptad			
			8:	3				
			8	4 City			<b>85</b> Z	ip Code
						FL	,	•
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obti	te of Florida. Such change was	: authorized I	ov the corno	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of t the app	changin ointment	g its registered as registered
SIGNATURE								
	Signature, typical or presed name of registered a			gent signature re-	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CDC AND	) DIDEC.	TODE IN 12
12.	OFFICERS A	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC	EUS VIAL	Chang	
NAME	PETH, JOHN A	pect	1,2 NAMI					
SIMEEL ADDRESS	11072 TUNG GROVE RD			ET ADDRESS				
OHY-ST-Zer	TALLAHASSEE FL		1.4 CiTY					
TillE	ST	DELETE	21 TITLE				☐ Chan	ge Addition
NAM!	PETH, ELIZABETH R		22 NAM					
SEREFT ADDRESS	11072 TUNG GROVE RD		23 STRE	ET ADDRESS				
CITY-S1-74°	TALLAHASSEE FL		2 4 City	- ST- ZIP				
1:11.1		DELETE	3 1 TITLE				Chan	ge 🔲 Addition
NAME			3.2 NAM	E				
STREET ACIDITIES'S			3.3 STRE	ET ADDRESS				
Clink St. St.			3.4, CITY	- ST- ZIP	***************************************			
THUE		DELETE	4.1 TI7LE				Chan	ge L Addition
NAME			4.2 NAM	lŧ i				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST ZIP		Deier	4.4 CITY				Ticken	no [ ] Addition
THE		☐ DELETE	5.1 TITLE				☐ Chan	ge Addition
NAME			5.2 NAM					
STREET ADDRESS				ET ADORESS				
CITY - ST - ZIP		DELETE	5.4 CITY				Chan	ige Addition
THELE			6.1 TITLE				L Cridii	go La notificit
NAME			6.2 NAM					
STREET ADDRESS	•			ET ADDRESS				
CITY-ST ZIP			6.4 CITY	-ST-ZIP				

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), 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