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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 568684

VIDEO CONSULTANTS, INC.

FILED Jan 21, 1999 8:00am Secretary of State 01-21-1999 90064 009 ***150.00

Principal Plac	ce of Business	Mailing Address				OLIDA (A)() D)O! B)O! El	IN BUBIC BUBCO B	IIFII QIQII FEBI
5220 S RUSSELL ST #40		5220 S RUSSELL S	5220 S RUSSELL ST #40					
TAMPA FL 33611		TAMPA FL 33611	TAMPA FL 33611		B0.1/0-			
						WRITE IN THIS	SPACE	·
ļ					3. Date Incorporated or Qua	anteo		
2 Principal P	Place of Business	2a. Mailing Addres			04/05/1978 4. FEI Number			plied For
21	·	26	33		59-2394787		<u> </u>	t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, 6	etc.		35 2354101		\$8.75 A	
22		27			5. Certifcate of Status Desir	red 🗀	Fee Re	
City & Stat	te	City & State	-		6. Election Campaign Finan	ncina —	\$5.00	May Be
23		28			Trust Fund Contribution	a 🗅	Added to	
Zip	Country	Zip	Zip Country		8. This corporation owes the	e current year Inta	ngible	
24	25	29	30		Personal Property Tax.		□Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of N	New Registered A	gent	
ION	IES, CLARENCE H. JR.	?	81	Name			•	
	0 S RUSSELL ST #40		82	Street Addre	ess (P.O. Box Number is Not Ac	cceptable)	. —	
	IPA FL 33611						<u> </u>	
174	IFA FL 33011		83					
			84	City	* 1 2 2		85 Zip C	ode
- PAG - 2 170 B				L.,		FL		;
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida of Florida, Such change	a Statutes, the above a was authorized by	e-named corpo	ration submits this statement fo n's board of directors. I hereby	or the purpose of c accent the appoint	nanging its ment as rec	registered
	am familiar with, and accept the obliga	ations of, Section 607.05			,	accept the appoint	·	9.0.0.02
	am familiar with, and accept the obliga	ations of, Section 607.05	05, Florida Statutes	i,	·			
agent. I a SIGNATURE	am familiar with, and accept the obligation of registered age	ations of, Section 607.05	05, Florida Statutes (NOTE: Registered Ager	i,	when rainstating)	DATE		
agent. I a SIGNATURE	im familiar with, and accept the obligation of registered age OFFICERS AI	ations of, Section 607.05 ent and title if applicable. ND DIRECTORS	(NOTE: Registered Ager	i,	·	DATE O OFFICERS AND	DIRECTO	
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14. 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 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, with all other like empowered.

SIGNATURE: