

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

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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 618055

1. Corporation Name

National TV Rentals, Inc.

Principal Place of Business 767 S. State Rd 7, #12 Margate, FL 33068	Mailing Address 767 S. State Rd 7, #12 Margate, FL 33068
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3. Date Incorporated or Qualified 4-11-79	3a. Date of Last Report 1-22-96
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2. Principal Place of Business 21 14620 N. Nebraska Ave. Suite, Apt. #, etc. 22 Bldg. B - Suite 102 City & State 23 Tampa, FL Zip 24 33613	2a. Mailing Address 26 714 E. Kimbrough Suite, Apt. #, etc. 27 City & State 28 Mesquite, TX Zip 29 75149	4. FEI Number 59-1914199 Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent Michael Kent 767 S. State Rd 7, #12 Margate, FL 33068	10. Name and Address of New Registered Agent 81 Name Billy W. White, Sr. 82 Street Address (P.O. Box Number is Not Acceptable) 14620 N. Nebraska Avenue 83 Building B - Suite 102 84 City Tampa FL 85 Zip Code 33613
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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 obligation of Section 607.0503, Florida Statutes.

SIGNATURE *Billy W. White, Sr.* BILLY W. WHITE, SR. 4-22-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME Michael Kent STREET ADDRESS 21640 Cartagena Drive CITY-ST-ZIP Boca Raton, FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE President & CEO 1.2 NAME Billy W. White, Sr. 1.3 STREET ADDRESS 714 E. Kimbrough 1.4 CITY-ST-ZIP Mesquite, TX	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SDT NAME Joy Kent STREET ADDRESS 21640 Cartagena Drive CITY-ST-ZIP Boca Raton, FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE VP, ST 2.2 NAME Daniel C. Breeden, Jr. 2.3 STREET ADDRESS 714 E. Kimbrough 2.4 CITY-ST-ZIP Mesquite, TX	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME Dave Haley STREET ADDRESS 6095 N.W. 96th Drive CITY-ST-ZIP Parkland, FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE CFO 3.2 NAME K. David Belt 3.3 STREET ADDRESS 714 E. Kimbrough 3.4 CITY-ST-ZIP Mesquite, TX	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> DELETE	4.1 TITLE Director 4.2 NAME George D. Johnson, Jr. 4.3 STREET ADDRESS 714 E. Kimbrough 4.4 CITY-ST-ZIP Mesquite, TX	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 from an attachment with an address.

SIGNATURE: *K. David Belt* K. DAVID BELT, CFO 4-22-97 (972) 288-9327
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)