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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 686488

STREET ADDRESS

CITY-ST-ZIP

VDS VIDEO SERVICES, INC.

	•						
Principal Plac	ce of Business	Mailing Address			4 100110 04101 (9110 01111 91001 19101 191	L REDAY DIDIL DADIE DADEN D	IIGII GIĞII IBBI
3136 WINTON RD., SOUTH STE. 304		3136 WINTON RD., SOUTH STE, 304					
ROCHESTER NY 14623		ROCHESTER NY 14623		DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualifed 09/03/1980		
2. Principal F	Place of Business	2a. Mailing Address	,		4. FEI Number	Ap	plied For
21		26			59-2026983	No	t Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	I
City & Star	te	City & State	T		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	o Fees
Zip 24	Country 25		Country 30	у	8. This corporation owes the current ye Personal Property Tax.	□Yes	□No
	9. Name and Address of Curr	ent Registered Agent		. 1	10. Name and Address of New Regist	tered Agent	
COL	LIDOTEIN COLOMAN KEGGLED		81	1 Name			
GOLDSTEIN, GOLDMAN, KESSLER 8		& UNDERBURG	82	2 Street Addre	ress (P.O. Box Number is Not Acceptable)		
MIA	MI FL 33131		83	3			
			84	4 City	5.16 % 16 4 - 4 5 6 6 7 7 7 16 4 9 5 8 27 17 4 6 1 7 1	85 Zip 0	Code
	<u></u>	Made somethings are injured.		1 '		FL '	1
	t to the provisions of Sections 607.05				on's board of directors. I hereby accept the	appointment as re-	gistered
ROCIAGENTI A	am familiar with, and accept the oblig	gations of, Section 607.0505, Flori	ida Statute Registered Age	s.	id when reinstating) $p_{i_1,\dots,i_{i_{2}},\dots,i_{2}}$.	ате	gioloroa
ROCIAGENTI A	am familiar with, and accept the obligation of registered a OFFICERS A	gations of, Section 607.0505, Flori pent and title if applicable. (NOTE:	Registered Age	ent signature required	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	ATE RS AND DIRECTO	RS IN 12
RODAGENTIL'S SIGNATURE 12. TITLE	Signature, typed or printed name of registered at OFFICERS A	gations of, Section 607.0505, Flori	Registered Age 13. 1.1 TITLE	S. ent signature required	id when reinstating) $p_{i_1,\dots,i_{i_{2}},\dots,i_{2}}$.	ате	gioloroa
ROCIAGENTI '8 SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered e OFFICERS A PSD DIZAK, STUART J	gations of, Section 607.0505, Flori pent and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME	s.	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	ATE RS AND DIRECTO	RS IN 12
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A DIZAK, STUART J 26 CHATAM WOODS	gations of, Section 607.0505, Flori pent and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent signature required	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	ATE RS AND DIRECTO	RS IN 12
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered e OFFICERS A PSD DIZAK, STUART J	gations of, Section 607.0505, Flori	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5	ent signature required	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
ROCIAGENT I A	Signature, typed or printed name of registered as OFFICERS A DIZAK, STUART J 26 CHATAM WOODS	gations of, Section 607.0505, Flori pent and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE	ent signature required	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	ATE RS AND DIRECTO	RS IN 12
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered as OFFICERS A DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 000000	gations of, Section 607.0505, Flori	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	ent signature required	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 000000	gations of, Section 607.0505, Flori	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE	ent signature required ET ADDRESS ST-ZIP	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 000000	gations of, Section 607.0505, Floring the section 607.0505, Florin	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO Change	RS IN 12 Addition
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE COS	Signature, typed or printed name of registered as OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring the section 607.0505, Florin	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 2.1 TITLE 2.2 NAME 2.3 STREE	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered as OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring the section 607.0505, Florin	13. 11 TITLE 1.2 NAME 1.3 STREE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.2 NAME	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); 38.1 D/ ADDITIONS/CHANGES TO OFFICE (\$2.20***********************************	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring the section 607.0505, Florin	13. 11 TITLE 1.2 NAME 1.3 STREE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.2 NAME	ent signature required ET ADDRESS ST-ZIP ET ADDRESS .ST-ZIP	d when reinstating); DA ADDITIONS/CHANGES TO OFFICE (20.20) 10.00 10.00	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered as OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring the section 607.0505, Florin	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.3 STREE 3.3 STREE 3.4 STREE 3.5 NAME 3.5 STREE 3.5 STRE	ent signature required ET ADDRESS ST-ZIP ET ADDRESS .ST-ZIP	d when reinstating); Sec. 5 ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered as OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring Sectio	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); DA ADDITIONS/CHANGES TO OFFICE (20.20) 10.00 10.00	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 000000	gations of, Section 607.0505, Floring Sectio	13.	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); DA ADDITIONS/CHANGES TO OFFICE (20.20) 10.00 10.00	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13.	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating); DA ADDITIONS/CHANGES TO OFFICE (20.20) 10.00 10.00	Change	RS IN 12 Addition Addition
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gations of, Section 607.0505, Floring Sectio	13.	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating). ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OF	RS AND DIRECTO Change Change	RS IN 12 Addition Addition
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); DA ADDITIONS/CHANGES TO OFFICE (20.20) 10.00 10.00	Change	RS IN 12 Addition Addition
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13.	ent signature required ET ADDRESS ST-ZIP	d when reinstating); D/ADDITIONS/CHANGES TO OFFICE:	Change	RS IN 12 Addition Addition
ROCIAGENT I A SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: NND DIRECTORS DELETE DELETE DELETE	13. 11 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.4 C	ent signature required ET ADDRESS ST-ZIP	d when reinstating). ADDITIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OF	Change Change	RS IN 12 Addition Addition Addition Addition
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); D/ADDITIONS/CHANGES TO OFFICE:	Change	RS IN 12 Addition Addition Addition Addition
ROCIAGENT: I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME WILL ON STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered at OFFICERS A PSD DIZAK, STUART J 26 CHATAM WOODS PITTSFORD, NY 00000	gent and title if applicable. (NOTE: NND DIRECTORS DELETE DELETE DELETE	13.	ent signature required ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating); D/ADDITIONS/CHANGES TO OFFICE:	Change Change	RS IN 12 Addition Addition Addition Addition

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 ecover 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 a caddress, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

FILED

Jan 29, 1999 8:00am

Secretary of State

01-29-1999 90062 048 ***150.00