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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999

DOCUMENT # **F25119** 1. Corporation Name

BROADCAST VIDEO, INC.

## May 04, 1999 8:00 am Secretary of State

05-04-1999 90007 003 \*\*\*150.00



		,	
Principal Place of Business	Mailing Address		-   1005/000 file food; debt filed jidib leve bible been blan glan debt geer com
20377 NE 15TH COURT 20377 NE 15TH COURT			
MIAMI FL 33179	MIAMI FL 33179		
	•		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualifed
	To Marking Address		03/12/1981 4. FEI Number Applied For
2. Principal Place of Business	2a. Mailing Address		59-2080083 Not Applicable
21 Suite Ant # etc	Suite, Apt. #, etc.		\$8.75 Additional
Suite, Apt. #, etc.	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing S5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year Intangible
24 25	29 30		Personal Property Tax.   ☐ Yes □ No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
	· · · · · · · · · · · · · · · · · · ·	81 Name	Malle / Heart
BERGKNOFF, ERIC J		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
SUITE 206		2037	7 No 15th Court
1101 NORTH FEDERAL HIGHWAY		83	
HALLANDALE FL 33009		84 City	85 Zip Code
_			7/A4/
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, t	he above-named corpo	oration submits this statement for the purpose of changing its registered
agent. I am familiar with, and agent the obligati	ons of, Section 607.0505, Florida	Statutes.	oration submits this statement for the purpose of changing its registered on a board of directors. I hereby accept the appointment as registered
SIGNATURE	FRA	UK LEGOW,	Secretary 4/28/99
Signature, typed of printed name of registered agent	and title if applicable. (NOTE: Regi	stered Agent signature required	
12.	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITLE P	☐ DELETE	1.1 TITLE	. Drange
NAME LEGOW, ERIC C		1.2 NAME	
STREET ADDRESS 20377 NE 15TH COURT		1.3 STREET ADDRESS	32/70
CITY-ST-ZIP MIAMI, FL 00000	☐ DELETE	1.4 CITY-ST ZIP	Change ☐ Addition
TITLE V	C DECE IE		
NAME O' NEILL, GEORGE		2.2 NAME	
STREET ADDRESS 20377 NE 15TH COURT	· ·	2.3 STREET ADDRESS	33179
CITY-ST-ZIP MIAMI, FL 00000	☐ DELETE	2.4 CITY-ST ZIP	F2Change ☐ Addition
TITLE STV	C. DECETE	3.2 NAME	
NAME LEGOW, FRANK STREET ADDRESS 20377 NE 15TH COURT		3.3 STREET ADDRESS	
		3.4. CITY-STAP	3479
CITY-ST-ZIP MIAMI, FL 00000	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
CITY-ST-ZIP	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY- ST-ZIP	
TITLE			
	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	☐ DELETE	6.1 TITLE 6.2 NAME	☐ Change ☐ Addition
NAME STREET ADDRESS	☐ DELETE		☐ Change ☐ Addition

CITY-ST-ZIP 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 of 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 of an attachment with an address, with all other like empowered.

SIGNATURE: