

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

FILED

Mar 10 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000001973 (7)

1. Corporation Name
BLOCKBUSTER VIDEO ACQUISITION CORP.

Principal Place of Business

LEGAL DEPARTMENT
200 S ANDREWS AVE
FORT LAUDERDALE FL 33301
US

Mailing Address

LEGAL DEPARTMENT
200 S ANDREWS AVE
FORT LAUDERDALE FL 33301-1884
US

2. Principal Place of Business

21 1201 Elm Street

Suite, Apt. #, etc.

22 City & State

23 Dallas, TX

Zip

24 75270

Country

25 USA

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

04/26/1993

3a. Date of Last Report

04/30/1996

4. FEI Number

65-0304832

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

300002108703

84 City

03/10/97-01051-003

***1815.00

FL

85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETENAME FIELDS, BILL
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301TITLE P ☒ DELETENAME BARRETT, H. SCOTT
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301TITLE EV ☐ DELETENAME BYRNE, THOMAS C
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301TITLE EV ☒ DELETENAME HAWKINS, THOMAS W
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301TITLE EV ☒ DELETENAME FLEETWOOD, ROBERT S
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301TITLE SVP ☐ DELETENAME PHILLIPS, JOE
STREET ADDRESS 200 S. ANDREWS AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33301

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 1201 Elm St.

1.4 CITY-ST-ZIP Dallas, TX 75270

2.1 TITLE Ex. V.P. ☐ Change ☒ Addition

2.2 NAME Gary Peterson

2.3 STREET ADDRESS 1201 Elm St.

2.4 CITY-ST-ZIP Dallas, TX 75270

3.1 TITLE Vice Chairman ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 1201 Elm St.

3.4 CITY-ST-ZIP Dallas, TX 75270

4.1 TITLE Ex. V.P. ☐ Change ☒ Addition

4.2 NAME Adam Phillips

4.3 STREET ADDRESS 1201 Elm St.

4.4 CITY-ST-ZIP Dallas, TX 75270

5.1 TITLE Ex. V.P. ☐ Change ☐ Addition

5.2 NAME Mark Gilman

5.3 STREET ADDRESS 1201 Elm St.

5.4 CITY-ST-ZIP Dallas, TX 75270

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS 1201 Elm St.

6.4 CITY-ST-ZIP Dallas, TX 75270

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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)