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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000157 (5)

BAUER AUDIO VISUAL, INC.

CITY-ST-ZIP

Lam an officer or director of Plans in Black 12 or Block

SIGNATURE:

Principal Place of Business Mailing Address 1607 WEST MOCKINGBIRD LANE 1607 WEST MOCKINGBIRD LANE DALLAS TX 75235 DALLAS TX 75235-5008 3. Date Incorporated or Qualified 3a. Date of Last Report 01/09/1996 2. Principa! Place of Business 2a. Mailing Address 4. FEI Number Applied For 75-2261935 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD **B2** Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 City Zip Code 84 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, Pypera or proposed can electric glatered agent and tille it applicable (NOTE: Registered Agent signature required when re-instating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6) 13. DELETE Change Addition TITLE 11 TITLE MEREDITH, TED James Dobson R2E034 NAME 1.2 NAME 1607 WEST MOCKINGBIRD LANE 1607 west Mockingbind Lane 1.3 STREET ADDRESS STREET ADDRESS DALLAS TX 75235 Dallas TX 75235 1.4 CITY - ST- ZIP C(TY-S1-Z∂ PSD DELETE 21 TITLE Change Addition TITLE **CUNNINGHAM. SKYLAR** 22 NAME NAME 1607 WEST MOCKINGBIRD LANE 2.3 STREET ADDRESS STREET ADDRESS DALLAS TX 75235 2. 4 CITY-ST-ZIP CITY - ST - 2IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS Offy-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 43 STREET ADDRESS 44 CITY - ST-ZIP CITY ST ZIP DELETE Change Addition 51 TITLE TIFLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CHTY-ST-7/F Change DELETE Addition 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ALORESS

6.4 CITY-ST-ZIP

information inclicated 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 pt he corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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