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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

F97000002136 (6) **DOCUMENT #**

BRENKA VIDEO US INC. Principal Place of Business Mailing Address 9655-E IGNACE STREET 9655-E IGNACE STREET BROSSARD **BROSSARD** DO NOT WRITE IN THIS SPACE **QUEBEC CANADA J4Y 2P3 QUEBEC CANADA J4Y 2P3** 3. Date Incorporated or Qualified 04/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 62-1269955 21 26 Not Applicable 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 Trust Fund Contribution Added to Fees 28 This corporation owes or has paid the current year Intanquete Zip Country Zip Country 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 660 EAST JEFFERSON STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 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 titln if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PCD DELETE Change Addition TITLE 1.1 TITLE VALIN, MARC NAME 1.2 NAME 178 RANG ST-ANDRE STREET ADDRESS 1.3 STREET ADDRESS **QUEBEC CANADA** CITY-ST-ZIP 1.4 CITY-ST-ZIP VSTD DELETE Addition TITLE Change 2.1 TITLE LEHOUX, GUY NAME 2.2 NAME 3695 OXFORD STREET STREET ADDRESS 2.3 STREET ADDRESS QUEBEC CANADA CITY-ST-ZIP 2. 4 CITY - ST - 2(P TITLE ☐ DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change ___ Addition TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change DELETE ☐ Addition TITLE 6.1 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

Block 12 or Block 13 if changed, or on an attachment with an address. Sec. / Frag. LEIN WHY EN LO

14. Thereby 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