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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

G70861

(1)

DOT VIDEO INC

DOCUMENT # 1. Corporation Name

				M 84.4.4 (1)41148 PETER W					
Principal Place	of Business	Mailing Address							
505 NW 65 C	T	505 NW 65 CT			-				
STE 200	N E EL 92200	Suite 200 Ft lauderdale fl 3:	2200.6120						
FT LAUDERDALE FL 33309 US FT LAUDERDALE FL 33309 US					3. Date Incorporated or Qualified 11/21/1983 11/21/1983 05/01/				
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number	.1	T A	oplied For	
21		26			59-2370397		No.	ot Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & State		City & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Z ip	Country	Zip	Country		8. This corporation has liability for it		nder sill	99.032,	
24	25	[29]	30		Florida Statutes Yes				
	9. Name and Address of Curre	nt Registered Agent	81	lame	10. Name and Address of New R	egistered Age			
HOOAN	OADI AND ECO								
	Garland ESQ As Olas 2nd Floor		82 S	treet Addre	ss (P.O. Box Number is Not Acceptable	e)			
	ERDALE FL 33301		83						
FI LAUD	ENDALE PL 33301								
			84 0	City		FL	35 Zip	Code	
familiär with SiGNATURE	h, and accept the obligations of, Soc Signature, typod or printed renne of registered agor	tion 607.0505, Florida Statutes	s. DTE: Flegistered Agert s ig			DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI				
TITLE	PTD	DELETÉ	1 1 TITLE			L) (Change	Addition	
NAME	TITCOMB, NORMAN		1.2 NAME						
STREET ADDRESS	4638 NW 44 CT. TAMARAC, FL 33319		1.3 STREET ADD						
CITY-ST-ZIP TITLE	1AMANAC, FL 33319	☐ DELETE	2.1 TITLE	IP		П	Change	Add tion	
NAME			2.1 THE.			μ,		[]	
STREET ADDRESS			2.3 STREET ADS	ORESS					
CITY-ST-ZIP			2 4 CITY - ST - Z						
TITLE		☐ DELETE	3.1 TITLE				Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3. STREET AD	DRESS					
CITY - ST - ZIP			3.4 CHTY - \$1 - Z	IP			· • · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	4. 1 THLE				Change	☐ Addition	
NAME			4.2 NAME						
STREET ADDRESS			4.3 STREET ADI	DRESS					
CITY-ST-ZIP		ET OF STE	4.4 CITY-S1-Z	IP			Chanca	□ Addition	
TITLE		DELETE	5 1 TOTLE			LJ.	Change	☐ Addition	
NAME			5.2 NAME	DDE CO					
STREET ADDRESS			5.3 STREET ADI						
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - Z 6. 1 TITLE	ır		П (Change	Addition	
NAME		[7]	6.2 NAME				•		
STREET ADDRESS			6.3 STREET AD	DRESS					
CITY-ST-ZIP			6.4 CITY- ST-Z						
14. I do hereby certify that oath; that	the information indicated on this and	nual report or supplemental ann poration or the receiver or trusts	nished and does n nual report is true a se empowered to	ot qualify fo	or the exemption stated in Section 119, te and that my signature shall have the s report as required by Chapter 607, Fil	same legal effe	ect as it i	made under	

SIGNATURE: __

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR THOMB 4/30/96