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

PROFIT CORPORATION ANNUAL REPORT

1997

EV-TONE-VIDEO, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # H80120

(9)

FILED
May 06 1997 8:00am
Secretary of State

| Mailing Address | a samanar gaba imini adam silain ismis mete mana dabat mibat mimit mimit mimit mimit |
|-----------------|--|

| Principal Place of Business Mailing Address |                                    |                               |                       |                    | {                  |                                  |  |              |                        |                |  |
|---|------------------------------------|-------------------------------|-----------------------|--------------------|--------------------|----------------------------------|--|--------------|------------------------|----------------|--|
| % ANTHONY J.                                |                                    |                               | ITHONY J. SALIBA      |                    |                    |                                  |  |              |                        |                |  |
| 4939 SOUTH U                                | I.S. #1                            | 4939                          | SOUTH U.S. #1         |                    |                    |                                  |  |              |                        |                |  |
| ft. Pierce fl                               | 34982                              | FT. F                         | 1ERCE FL 34982-701    | 0                  |                    |                                  | 3. Date Incorporated or Qualified 10/15/1985   | 1            | e of Last I<br>1/1996  | Report         |  |
| 2. Principal P                              | lace of Business                   | 2a. N                         | Mailing Address       |                    |                    |                                  | 4. FEI Number  | الاستنسال    |                        | Applied For    |  |
| 21  |                                    |                               | 26                    |                    |                    | 59-2582968                       |  |              | lot Applicable         |                |  |
| Sulte, Apt. #, etc.                         |                                    |                               | Suite, Apt #, etc.    |                    |                    | 5. Certificate of Status Desired |  |              | Additional<br>Required |                |  |
| City & State                                |                                    |                               | City & State          |                    |                    | 6. Election Campaign Financing   | Election Campaign Financing \$5.00 May Be  |              |                        |                |  |
| 23  | 28                                 |                               |                       | again angainn      |                    |                                  | Trust Fund Contribution  | . 🛛          | Addec                  | to Fees        |  |
| Zip   | Countr                             | ·                             | 'ip                   | Country            |                    |                                  | 8. This corporation has liability for  |              |                        | s. 199.032,    |  |
| 24  | 25                                 | 29 <br> ss of Current Registe | rad Anani             | 30                 |                    |                                  | Florida Statutes L.  10. Name and Address of New Re  | Yes No       |                        |                |  |
| CALL  | IBA, ANTHONY J.                    | saa Oi Culloik negiste        | red Agent             |                    | <b>81</b> N        | lame                             | 10. Name and Address of New Ne   | gistorou A   |                        |                |  |
|   | 9 80 U.S. #1                       |                               |                       |                    |                    |                                  |  |              |                        |                |  |
|   | 9 60 0.5. #1<br>PIERCE FL 34982    |                               | 82 3                  |                    |                    | Street Addr                      | reet Address (P.O. Box Number is Not Acceptable)   |              |                        |                |  |
| F1. I                                       | rienue fl 34802                    |                               |                       | }                  | 83                 |                                  |  |              |                        |                |  |
|   |                                    |                               |                       |                    |                    | v <u></u> .                      |  |              |                        |                |  |
|   |                                    |                               |                       |                    | 84 (               | City                             |  | FL           | <b>85</b> Zip          | Code           |  |
| 11. Pursuant                                | to the provisions of Sec           | tons 607.0509 april 607       | '.1508, Florida Statu | ites, the ab       | L                  | amed corp                        | poration submits this statement for the r  | urpose of    | L L changing           | its registered |  |
| 11. Pursuant office or reagent. I a         | e wilder of the low of             | Size of loride                | Such change was       | authorized         | by th              | e corporat                       | poration submits this statement for the particular submits this statement for the particular submits the submits t | of the appo  | ointmont a             | s registered   |  |
| ugonii i d                                  | WHI IN                             | ASSIAN                        | C.11011 01/7 .0303, T | ionua siait        | nes.               |                                  | $\lambda I$  | RA19         | A                      |                |  |
| SIGNATURE                                   | of all the Town                    | rog to color it and title it  | (NC                   | HE Registered      | Agent s            | ignature requi                   | red when reinstating)  | DATE         | - <i>(</i> //          |                |  |
| 12.   | 4 //                               | FFICERS AND DIRECT            | ORS                   | 13.                |                    |                                  | ADDITIONS/CHANGES TO OFFIC   | ER\$ AND     | DIRECTO                | RS IN 12       |  |
| TITLE                                       | VSD                                |                               | DELETE                | 1.1 101            | LE                 |                                  |  |              | Change                 | Addition       |  |
| NAME  | SALIBA, EVELYN V                   |                               |                       | 1.2 NA             | MŁ                 |                                  |  |              |                        | 1              |  |
| STREET ADDRESS                              | DRESS 1307 WHITE OAK LANE          |                               | 1                     |                    | 1.8 STREET ADDRESS |                                  |  |              |                        |                |  |
| CITY-ST-ZIP                                 | FT PIERCE FL                       |                               |                       |                    | Y-SI-7             | IP .                             |  |              |                        |                |  |
| TITLE                                       | PID                                |                               | DELETE 2.01           |                    | łΕ                 |                                  |  |              | Change                 | Addition       |  |
| NAME :                                      |                                    |                               |                       | 2.2 NAME           |                    |                                  |  |              |                        |                |  |
| *** 1.5 11**                                | STREET ADDRESS 1307 WHITE OAK LANE |                               |                       | 2.8 STREET ADDRESS |                    |                                  | 5  |              |                        |                |  |
| CITY-ST-ZIP                                 | FT PIERCE FL                       |                               |                       |                    | 1Y - S1 - Z        | 202                              |  |              |                        | 17 4356        |  |
| TITLE                                       |                                    |                               | ☐ DEFEIE              |                    | 3.1 Title          |                                  |  |              | L Change               | Addition       |  |
| NAME  |                                    |                               |                       | 3.2 NA             |                    | 00000                            |  |              |                        |                |  |
| STREET ADDRESS                              |                                    |                               |                       |                    | REE1 ADI           |                                  |  |              |                        |                |  |
| CITY-ST-ZIP<br>TITLE                        |                                    |                               | DELETE                | 3.4. CI<br>4.1 TIT | IY - SI - 2        | (0,                              | ONE OF CHARGE AT EACH PROPERTY OF CHARGE AND CHARGE STORES AND AND AND AND AND AND ADDRESS |              | Change                 | Addition       |  |
| NAME  |                                    |                               | L. OLLLIC             | 4.1 (II<br>4.2 N/  |                    |                                  |  |              | — onange               | L. Muditivii   |  |
| STREET ADDRESS                              |                                    |                               |                       |                    | anii<br>Reel adi   | DRESS                            |  |              |                        |                |  |
|   |                                    |                               |                       |                    | 1Y-\$1-7           |                                  |  |              |                        |                |  |
| TITLE                                       |                                    |                               | DELETE                | 5.1 70             |                    |                                  | MAA MAANIMIN MAARIMIN MAAAMAMAMAMAA 1994 , 1897 A 18 MARI MAY MATURIMIN MAAA I STAAD AN ARISMA AND ARISMA   |              | Change                 | Add:tion       |  |
| NAME  |                                    |                               | <u> </u>              | 5.2 NA             |                    |                                  |  |              |                        |                |  |
| STREET ADDRESS                              |                                    |                               |                       |                    | REET ADI           | DRESS                            |  |              |                        |                |  |
| CITY-ST-ZIP                                 |                                    |                               |                       |                    | Y-\$1-Z            |                                  |  |              |                        |                |  |
| TITLE                                       |                                    |                               | DELETE                | 61 III             |                    |                                  | rada perios i industrias de decensos destretos de tras independente de destreto de seculo de seculo de tentra d  |              | Change                 | Addition       |  |
| NAME  | ·                                  |                               |                       | 62 NA              |                    |                                  |  |              | -                      |                |  |
| STREET ADDRESS                              |                                    |                               |                       |                    | HEET ADI           | DRESS                            |  |              |                        |                |  |
| CITY-ST-ZIP                                 | /                                  | <b>~</b> )                    |                       |                    | IY-ST-Z            | í                                |  |              |                        |                |  |
|   | by certify that the illorn         | nation supplied with this     | filing does not qua   |                    |                    |                                  | d in Section 119.07(3)(i), Florida Statute   | s. I further | certily tha            | al the         |  |

I do hereby certify that the formation supplied with this filing does not qualify for the exemption stated in Socion 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental agricular report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it am an officer or director of the corporation or the resolver of trustee employeed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if chapted, or on a attrainment with an address.

MONATURE IN THE

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561-465-0666