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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H97525

TROPICAL VIDEO PRODUCTIONS, INC.

(0)

FILED May 16 1997 8:00am Secretary of State

	rincipal Place of Business	•							
	iamí Pl. 33126	MIAMI FL 33126-5501	MIAMI FL 33128-5501						
					3. Date Incorporated or Qualified 02/04/1986	3a. Date of t			
2.	Principal Place of Business	2a. Mailing Address	2a. Mailing Address			ΙΙ	Applied For		
21	:	26	26				Not Applicable		
22	Sulte, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Section Fee Required				
23	City & State	City & State			Election Campaign Financing Trust Fund Contribution	· .	5.00 May Be dded to Fees		
24	Zip Country 25	Zip 30	Oountry 1		8. This corporation has liability for in Florida Statutes	ntangible tax ur Yes 🔲 No	nder s. 199.032,		
	9. Name and Address	of Current Registered Agent			10. Name and Address of New Reg	Istered Agent			
	FEUER, JACK W.		81	Name					
	12732 SW 116 TERRACE Miami Fl		82 Street Addre			ress (P.O. Box Number is Not Acceptable)			
			83						
			64	City		FL 85	Zip Code		
11	 office or registered agent, or both, in 	ns 607.0502 and 607.1508, Florida Statutes, n the State of Florida. Such change was auti	the above	e-named corpora	poration submits this statement for the pution's board of directors. I hereby accept	irpose of chan the appointme	ging its registered ent as registered		

office or agent. I a	registered agent, or both, in the State of Florida. S am familiar with, and accept the obligations of, Se	luch change was a ction 607.0505, Fig	authorized by the corpo orida Statules.	ration's board of directors. II	hereby accept the appointment as	registered	
SIGNATURE	Signature, typed or printed name of registered agent and to his app	licable (NOII)	E Registered Agent signature re	puired when reinstat no)	DATE		
12,	OFFICERS AND DIRECTORS				CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE		Change	Addition	
NAME	REDSTONE, ROBERT M.		1.2 NAME				
STREET ADDRESS	11705 SW 135 PLACE		1.8 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP				
TITLE	VSD	DELETE	2.1 TITLE		Change	Addition	
NAME	FEUER, JACK W.		2.2 NAME		_ •		
STREET ADDRESS	12732 SW 116 TERRACE		2.8 STREET ADDRESS				
CITY-ST-ZIP	MAMI FL		2.4 CITY - S1 - ZIP				
TITLE	D	DELETE	3.0 TOLE		Change	Addition	
NAME	HAVENICK, BARBARA		3.È NAME	6.6			
STREET ADDRESS	401 NW 38TH COURT		3.8 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		3.4. CITY - S1 - ZIP				
TITLE	D	DELETE	4.1 TITLE		Change	Addition	
NAME	AMDUR, ISABELLE	_	4.2 NAME		— ·		
STREET ADDRESS	410 NW 38TH COURT		4.B STREET ADDRESS				
CITY-ST-ZIP	MAMI FL		4.4 CITY - ST - ZIP				
TITLE	D	DELFTE	5.1 TITLE		Change	Addition	
NAME	HECHT, FLORENCE	_	5.P. NAME	•			
STREET ADDRESS	401 NW 38TH COURT		5.B STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		5 4 CITY - ST - ZIP				
TITLE	7125 111 1 14	DELETE	61 11115		Change	Addition	
NAME			6 2 NAME		Onongo	Samuel Control (CI)	
STREET ADDRESS			6 B STREET ADDRESS				

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.

64 DITY-ST-ZIP