## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J30608 1. Corporation Name

VIDEO SCAN INC

% CHRISTOPHER J. SCHRADER 795 - 7TH ST SOUTH 203 APACHE STREET SAFETY HARBOR FL 34695	VIDEO GOAR, INC.									
203 APACHE STREET TAVERNIER FL 33070  2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. 2c. Suite, Apt. #, etc. 2d. Suite, Apt. #, etc. 2d. City & State 2d. City & State 2d. City & State 2d. Country 2d. Countr	Principal Place of Business	Mailing Address					r comercion mema contra musica mitiet militati (Milita			
3. Date Incorporated or Qualifed  08/25/1986  2. Principal Place of Business  2a. Mailing Address  2b. Vertical or Qualifed  08/25/1986  4. FEI Number  59-2719038  Suite, Apt. #, etc.  2c. Suite, Apt. #, etc.  2c. City & State  2c. Country  2c. City & State  2c.	203 APACHE STREET									
2. Principal Place of Business  2. Principal Place of Business  2. Mailing Address  2. Mailing Address  2. Mailing Address  3. Mailing Address  4. FEI Number  59-2719038  Suite, Apt. #, etc.  2. Suite, Apt. #, etc.  2. City & State  City & State  2. City & State  2. City & State  2. City & State  2. Country  2. Zip  Country  2. Zip  Country  2. Zip  Country  3. This corporation owes the current ye Personal Property Tax.  9. Name and Address of Current Registered Agent  SCHRADER, CHRISTOPHER J.  203 APACHE STREET  TAVERNIER EL 32070	TAVERNIER FL 330/0	US					DO NOT WRITE IN			
2. Principal Place of Business  2a. Mailing Address  59-2719038  Suite, Apt. #, etc.  2b. Suite, Apt. #, etc.  2c. Suite, Apt. #, etc.  2c. City & State  2c. Certificate of Status Desired  7c. Trust Fund Contribution  8c. This corporation owes the current year  9c. Name and Address of New Regist  8c. Street Address (P.O. Box Number is Not Acceptable)  8c. Trust Fund Contribution  9c. Trust Fu						3.				
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  Suite, Apt. #, etc.  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  City & State  Suite, Apt. #, etc.  City & State  City & State  Country  8. This corporation owes the current ye personal Property Tax.  9. Name and Address of Current Registered Agent  SCHRADER, CHRISTOPHER J.  203 APACHE STREET  TAYFENIFIP EL 32070	2. Principal Place of Business	2a. Mailing Address				4.	<u> </u>			
Suite, Apt. #, etc.    22		26				-	59-2719038			
23 28 6. Election Campaign Financing Trust Fund Contribution  Zip Country Zip Country 8. This corporation owes the current ye 24 25 29 30 Personal Property Tax.  9. Name and Address of Current Registered Agent 10. Name and Address of New Regist  SCHRADER, CHRISTOPHER J. 203 APACHE STREET TAVERNIFIR EL 32070	22					5.				
24 25 29 30 8. This corporation owes the current ye Personal Property Tax.  9. Name and Address of Current Registered Agent 10. Name and Address of New Regist SCHRADER, CHRISTOPHER J.  203 APACHE STREET 82 Street Address (P.O. Box Number is Not Acceptable)  TAVERNIER EL 32070	23					6.				
SCHRADER, CHRISTOPHER J.  203 APACHE STREET  TAVERNIER EL 33070	24 25	29		ountry		8.				
SCHRADER, CHRISTOPHER J.  203 APACHE STREET  TAVEBNIER EL 33070	9. Name and Address of Cu	urrent Registered Agent				10.	Name and Address of New Registe			
TAVERNIED EL 33070										
TAVEHNIEH FL 33U/U				32 Street Addit			.O. box number is Not Acceptable)			
	TAVERNIER FL 33070			83	·		-			

## **FILED** Feb 19, 1999 8:00am **Secretary of State**

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Principal Pla	ce of Business	Mailing Address					TOU COLD DIGITIES	AND RINKE NI	IN BING NINK INDI
% CHRISTOPHER J. SCHRADER 203 APACHE STREET TAVERNIER FL 33070 TO SCHRADER 795 - 7TH ST SOUTH SAFETY HARBOR FL 34695 US		5							
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					,	3. Date Incorporated or Qualifed			
2. Principal	Place of Business	2a. Mailing Address				08/25/1986 4. FEI Number		<del></del>	
21		26				59-2719038		-	Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				38 21 19030			Not Applicable
22		27				5. Certifcate of Status Desired			Additional Required
City & Sta	te	City & State				6. Election Campaign Financing			0 May Be
23		28				Trust Fund Contribution		•	u may Be d to Fees
Zip 	Country	Zip	Coun	try		8. This corporation owes the curre	ent vear Inta		- 15 1 005
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered /	gent	<u></u>
SCF	IRADER, CHRISTOPHER J.		1	31 Nan	16				
	APACHE STREET		la la	32 Stre	et Addre	ss (P.O. Box Number is Not Acceptal	ble)		
	ERNIER FL 33070								
.,,,	E.WEIT FE OUT O			33					
			Ī	4 City				85 Zip	Code
44 Durawant	to the manufacture of O. 11. 007.0500			'			FL	1 1	
	to the provisions of Sections 607.0502 registered agent, or both, in the State of the familiar with, and accept the obligation				ed corpor	ration submits this statement for the p	surpose of c	hanging if	s registered
agent. I a	im familiar with, and accept the obligation	ons of, Section 607.0505, Flor	ida Statut	es.	poradon	rs board or directors. Thereby accept	uie appoin	iment as r	egisterea
SIGNATURE	Slaveture transfer								
12,	Signature, typed or printed name of registered agent a OFFICERS AND		Registered A	ent signatu	re required v	when reinstating)	DATE		
TITLE	DP STREETS AND	DELETE	1.1 TITU	:		ADDITIONS/CHANGES TO OFF	ICERS AND		
VAME	SCHRADER, CHRISTOPHER J.		1.2 NAMI					Change	Addition
STREET ADDRESS	203 APACHE STREET		4	ET ADDRES					
CITY-ST-ZIP	TAVERNIER FL				"				
TITLE	DVP	☐ DELETE	1.4 CITY- 2.1 TITLE		+		<del></del>	Change	(FT Auditor
NAME	SEPION, JOSEPH A.	<del>_</del> :====	2.2 NAME					☐ Change	Addition
STREET ADDRESS	795 7TH ST SO			ET ADDRES					
CITY-ST-ZIP	SAFETY HARBOR FL		2.4 CITY		1	and the second second	•		
TITLE		☐ DELETE	3.1 TITLE		<del></del>			Change	Addition
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TREET ADDRESS			3.3 STRE	ET ADDRES	s				
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ITLE		☐ DELETE	4.1 TITLE		1			Change	Addition (
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ITY-ST-ZIP			4.4 CITY-						
TILE		☐ DELETE	5.1 TITLE		T-	-		Change	Addition
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ITY-ST-ZIP			5.4 CITY-	ST-ZIP					
TLE	-	☐ DELETE	6.1 TITLE		$\top$			☐ Change	☐ Addition
AME	^		6.2 NAME		1		•	•	_ "

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 conforation or the repower of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Slock 12 or Block 13 if changed, or organ attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

TREET ADDRESS

CITY-ST-ZIP

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12.

TITLE

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