

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J71844 (1)

1. Corporation Name:

ACTION-VIDEO REALTY & INVESTMENTS, INC.



Principal Place of Business

Mailing Address

400-B N.E. 3RD. ST.
DELRAY BEACH FL 33483

400-B N.E. 3RD. ST.
DELRAY BEACH FL 33483

3. Date Incorporated or Qualified

05/08/1987

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 487 Town Center Road

26 1301 S.W. 10th. Avenue

4. FEI Number

59-2817090

Applied For

(Not Applicable)

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

☐

Yes

☐

No

24 33431

Country

25 Palm Beach

29

Zip 33444

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOVACS, GENE
400-B N.E. 3RD. ST.
DELRAY BEACH FL 33483

81 Name

KOVACS GENE

82 Street Address (P.O. Box Number is Not Acceptable)

1301 S.W. 10th. Avenue Apt# F-204

83

84 City

DELRAY BEACH

FL

85 Zip Code

33444

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 title if applicable)

(If Not Registered Agent signature required when not changing)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD
NAME KOVACS, GENE
STREET ADDRESS 400-B N.E. 3RD. ST.
CITY- ST- ZIP DELRAY BEACH FL

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

1301 S.W. 10th. Avenue
DELRAY BEACH, FL. 33444

☒ Change ☐ Addition

TITLE V
NAME KOVACS, BRUCE
STREET ADDRESS 100 OCEAN TERR.
CITY- ST- ZIP INDIAN LANTIC FL

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE T
NAME KOVACS, SUSIE
STREET ADDRESS 90 N.E. 158TH STREET
CITY- ST- ZIP N. MIAMI BEACH FL

☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

10130 S.W. 50th. Court
COOPER CITY, FL. 33328

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 26, 1996
107-750-0094

CR2E034 (3/96)