

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0054245

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

98 NOV -2 PM 3:45

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # **J77906** (2)
 1. Corporation Name
VIDEOTRON INCORPORATED

Principal Place of Business 10420 S.W. 143 AVE. MIAMI FL 33186	Mailing Address 10420 S.W. 143 AVE. MIAMI FL 33186
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

3. Date Incorporated or Qualified 06/16/1987	
4. FEI Number 59-2815272	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
STEWART, DONNARAE
 13350 SW 1285T
 PARK PLACE
 MIAMI FL 33186

10. Name and Address of New Registered Agent
 81 Name ~~RANDY PEREZ~~ **GEORGE LEE**
 82 Street Address (P.O. Box Number is Not Acceptable)
~~2552 N. STATE RD 7~~
 83 **10420 SW 143 AVE**
 84 City ~~Hollywood~~ **MIAMI** FL 85 Zip Code **33186**

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 George Lee (NOTE: Registered Agent signature required when reinstalling) DATE **10-27-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEE, GEORGE Y.W. 10420 S.W. 143 AVE. MIAMI FL	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEE, WILLIAM PONTON 68G, ARUBA, DUTCH, W.IND.	<input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LEE, BARBARA 10420 SW 143 AVE MIAMI FL	DELETE OK keep	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEE, ELEANOR PONTON 68G O'STAD, ARUBA	<input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, NEIL LOD VAN NASSAUSTR 8 SAN NICOLAS, ARUBA	<input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WONG, ANNA LAGOEN, WEG 15 OSTAD, ARUBA	<input checked="" type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2.1 TITLE Change Addition
VP Wong, ANNA.
 2.2 NAME
LAGOEN WEG 15
 2.3 STREET ADDRESS
OSTAD, ARUBA
 2.4 CITY-ST-ZIP
 3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP
 4.1 TITLE Change Addition
800002682648-3
-11/06/98--01094--010
*****1100.00 ***550.00**
 5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP
 6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP
B 11/4/98 AN

14. I 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.

SIGNATURE: _____ SIGNATURE REQUIRED **9-23-98 (205) 287-7646**

CR2E034 (5/98)