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FILED  
Mar 24 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J81333 (3)

1. Corporation Name  
SENDEREY VIDEO PRODUCTION, INC.



Principal Place of Business Mailing Address  
4967 NW 67TH AVENUE 4967 NW 67TH AVENUE  
LAUDERHILL FL 33319 LAUDERHILL FL 33319-7219

3. Date Incorporated or Qualified 07/07/1987  
3a. Date of Last Report 02/07/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 State, Apt. #, etc.	26 Suite, Apt. #, etc.	59-1506413	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent  
BOMSER, STEVEN CPA  
1001 NW 82 ST  
SUITE 609  
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent  
81 Name RICHARD E. LEVENSON, C.P.A.  
82 Street Address (P.O. Box Number is Not Acceptable) 499 N.W. 70 AVENUE.  
83 SUITE 116.  
84 City PLANTATION, FL 85 Zip Code 33317

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 obligation of, Sections 607.0505, Florida Statutes.

SIGNATURE: *Richard E. Levenson* Richard E. Levenson 3/12/97  
DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	SENDEREY, EFRIAM	
STREET ADDRESS	7721 BALBOA ST.	
CITY- ST- ZIP	SUNRISE FL	
TITLE	SVD	<input type="checkbox"/> DELETE
NAME	SENDEREY, BEATRICE	
STREET ADDRESS	7721 BALBOA ST.	
CITY- ST- ZIP	SUNRISE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	SENDEREY, EFRIAM.	
1.3 STREET ADDRESS	4967 N.W. 67 AVENUE	
1.4 CITY- ST- ZIP	LAUDERHILL - FL. 33319.	
2.1 TITLE	SVD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SENDEREY, BEATRICE	
2.3 STREET ADDRESS	4967 N.W. 67 AVENUE.	
2.4 CITY- ST- ZIP	LAUDERHILL - FL. 33319.	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

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.

SIGNATURE: *Beatrice Senderey* BEATRICE SENDEREY 01.16.97 954.748877  
DATE DAYTIME PHONE #

CR2E034 (9/96)