

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90025 020 ***158.75

DOCUMENT # L33011

1. Entity Name

VIDEO CONCEPTS LIMITED, INC.



Principal Place of Business

19418 EVERTON PLACE
LAND O LAKES FL 34639
US

Mailing Address

19418 EVERTON PLACE
LAND O LAKES FL 34639
US



2. Principal Place of Business - No P.O. Box #

4214 Mill Valley Ct.

3. Mailing Address

4214 Mill Valley Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Tampa, Florida

City & State

Tampa, Florida

4. FEI Number

59-3011675

Applied For

Not Applicable

Zip

33618

Country

USA

Zip

33618

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MASKY, WALTER G
19418 EVERTON PLACE
LAND O LAKES FL 34639

7. Name and Address of New Registered Agent

Name: Walter G. Masky

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

4214 Mill Valley Ct.

Tampa, FL

City

FL

Zip Code

33618

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Walter G. Masky

(NOTE: Registered Agent signature required when renewing)

Jan 29, 2007

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME MASKY, WALTER G
STREET ADDRESS 19418 EVERTON PLACE
CITY - ST - ZIP LAND O LAKES FL 34639

TITLE STVD ☒ Delete
NAME HAMILTON, DIANN
STREET ADDRESS 101 GATES AVE A-6
CITY - ST - ZIP MONTCLAIR NJ 07042

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☒ Change ☐ Addition
NAME Walter G. Masky
STREET ADDRESS 4214 Mill Valley Ct.
CITY - ST - ZIP Tampa, FL 33618

TITLE VD ☒ Change ☐ Addition
NAME D. Ann Masky Hamilton
STREET ADDRESS 6 Westwood Drive North
CITY - ST - ZIP West Orange, New Jersey 07052

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Walter G. Masky

Date

Daytime Phone #

P - Jan 28-07

(813)

293-5212