FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT LUORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)L69354 VIDEO PROMOTIONS, INC. Principal Place of Business Mailing Address 407 LINGOLN BOAD 12F 407 LINCOLN ROAD TEF SUITE 214 MAMI BEACH FL 33139 MIAMI BEACH FL 30139 Suite, Apt. #, etc. 81 STONE DONNA ABT LINCOLN ROAD 12E 82 MIAMI BEACH FL 33139 83 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both A the State of Fld da. Such change was authorized by the corporation's agent. Lam familia, with, and access the dialigations of Section 607.0506. Florida Statutes. OFFICERS AND DIRECTORS 13. 12. DELETE PST 1.1 TITLE TITLE STONE, DONNA 1.2 NAME NAME 407 LINCOLN RD-12F STREET ADDRESS **JAIAMI BEACH FL 3313**9 CITY-ST-ZIP DELETE 2 1 11TLE TITLE 2.2 NAME NAME STREET ADDRESS CITY-ST-ZIP DELFTE 31 TITLE

CITY-ST-ZIP

May 21 1998 8:00am Secretary of State

DO NOT WRITE	IN TI	HIS SPACE		
Cate Incorporated or Qualified				
05/01/1990				
FEI Number			Applied For	
65-0208629			Not Applicable	
Certificate of Status Desired			\$8.75 Additional Fee Required	
Election Campaign Financing Trust Fund Contribution		T	\$5.00 May Be Added to Fees	
This corporation owes or has pa Personal Property Tax due June		current yea	r Intangible No	
Name and Address of New Re	giste	red Agent		
NNA STONE	٠			
O. Box Number is Not Accepta	HZ	ane.	•	

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Name

Street

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n submits this statement for the purpose of changing its registered poard of directors. I hereby accept the appointment as registered ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 13205 N.F. 16th Ave. 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP Addition 2.3 STREFT ADDRESS 2. 4 CITY-ST-ZIP Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ■ Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 C(TY-ST-ZIP

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 of supplience all 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 change