**FILED** 

Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90003 020 \*\*\*158.75

-/ PRŐFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M79158

1. Corporation Name

NEW ERA VIDEO, INC.

								(
Principal Place of Business Mailing Address								
5894 SW 42 ST				5783 SW 40 ST				•
6840 S.W. 92ND ST.				#157				DO NOT WRITE IN THIS SPACE
MIAMI FL 33155				MIAMI FL 33156				
us us								3. Date incorporated or Qualifed 05/03/1988
2. Principal Place of Business				2a. Mailing Address				4. FEI Number NOT-APPLICABLE W5-0833442 Applied For Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5 Contiferto of Status Desired \$8.75 Additional
				27				Fee Required
City & State				City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip Country				Zip Country				8. This corporation owes the current year Intangible
24	25			30				Personal Property Tax.
	tered Agent	nt			10. Name and Address of New Registered Agent			
				_		81	Name	
Greenberg, Winnie W 5894 SW 42ND ST						82	Street A	ddress (P.O. Box Number is Not Acceptable)
MIAMI FL 33155						83		
						84	City	85 Zip Code
			_					FL W
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 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 approagent. I am familiar with the accept the ordination of the ordination of the ordination of the purpose of agent. I am familiar with the ordination of the ordination of the purpose of the purpose of the above-named corporation submits this statement for the purpose of								ation's board of directors. Thereby accept the appointment as registered
12.	Signature, typed		S AND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPV			☐ DELETE	1.1 Ti	TLE		☐ Change ☐ Addition
NAME	-	ERG, MICHAEL			1.2 N	AME	1	· ·
STREET ADDRESS	0400 044	46TH ST.			13S	TREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL					TY-S1		
TITLE	S	·		☐ DELETE	2.1 T			☐ Change ☐ Addition
NAME	-	ERG, MICHAEL			2.2 N	AME.	ļ	
		46TH ST.					ADDRESS	
STREET ADDRESS	MIAMI FL					TY-S		
CITY-ST-ZIP TITLE	IVID-SIVII I L			☐ DELETE	3,1 T		1-21-	— Change Addition
NAME	1				3,2 N		\	
							ADDRESS	
STREET ADDRESS						ITY-S	i	
CITY-ST-ZIP				☐ DELETE	4,1 1		1-21	☐ Change ☐ Addition
	Ì					IAME	ĺ	- ·
NAME			-				ADORESS	
STREET ADDRESS								
CITY-ST-ZIP				DELETE	4.4 C	ITY-S	1-ZIP	☐ Change ☐ Addition
TITLE					5.1 T			
NAME							ADDRESS	1
STREET ADDRESS						ITY-S		ļ
CITY-ST-ZIP				DELETE	6.1 T		-217	Change Addition
TITLE	1				6.2 N			
NAME							ADDRESS	<b>\</b>

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, of on an attachment with an address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP