

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000039593

1. Entity Name
PERRY VIDEO, INC.



FILED
Mar 18, 2004 08:00 AM
Secretary of State

Principal Place of Business
**1189 N. U.S. 1
ORMOND BEACH, FL 32174**

Mailing Address
**1189 N. U.S. 1
ORMOND BEACH, FL 32174**



03152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3360309

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ARMSTRONG, LINDA
1189 N. U.S. 1
ORMOND BEACH, FL 32174**

**DO NOT WRITE
IN THIS SPACE**

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 *Linda Armstrong*
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

March 15, 2004
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00.

9. Election Campaign Financing
Trust Fund Contribution: ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **ARMSTRONG, BRENT**
STREET ADDRESS **1189 N. U.S. 1**
CITY- ST- ZIP **ORMOND BEACH, FL 32174**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

U00000091840
03/18/04-60024-025-150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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:

Brent Armstrong
Signature typed or printed name of signing officer or director

President
Title

386-676-1073
Telephone Number