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**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P27042 1. Corporation Name

1. Corporation	n Name			A STATE OF A TOP OF TAKE
SOUTHE	ASTERN HOME VIDEO, INC.			SECHARA CAR STATE TALLAMASSIE, FLORIDA
Principal Plac	e of Business	Mailing Address		)
1201 ELM STREET DALLAS TX 75270 US		C/O PHILIPPE P. DAUMAN 1515 BROADWAY NEW YORK NY 10036		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  11/22/1989
2, Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26 C/O MICHAEL D. FRICKLAS		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Suite, Apt. #, etc.		Suite, Apt #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired [   Fee Required
City & State		City & State		6. Election Campaign Financing [1] \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip 24	Country 25	Ζιρ [29]	Country	8. This corporation owes the current year Intangible Personal Property Tax Lifes Line
	9. Name and Address of Current	Registered Agent	-	10. Name and Address of New Registered Agent
THE	PRENTICE-HALL CORPORATION	SYSTEM INC	81 Name	
1201 HAYS STREET			82 Street	Address (P.O. Box Number is Not Acceptable)
SUITE 105			83	600002769536;;;4
i	AHASSEE FL 32301			-02/09/99~-U1U59~-U1I
			84 City	****150.pp
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 obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or pented name of registered agent and their applicable. (NOT). Registered Agent signature required when rejustables.				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD ANTICOO TOURLE	[ ] DELETE	1 1 TITLE	[ ] Change [ ] Addition
NAME :	ANTIOCO, JOHN F		1 2 NAME	
STREET ADDRESS	1201 ELM STREET DALLAS TX 75270		13 STREET AUDRESS	
CITY-ST-ZIP TITLE	VCFO	[] DELETE	14 CITY-ST-ZIP 21 TITLE	[ ] Change [ ] Addition
NAME	LYALL, LYNN J	(_) <i>beer</i> / [	22 NAME	( ) change ( ) had to
STREET ADDRESS	1201 ELM STREET		23 STREET ADDRESS	
CITY-ST-ZIP ■	DALLAS TX 75270		2 4 C(1Y-S1-Z)P	
TITLE	D	[ ] DELETE	31 TITLE	SVPD MChange [   Addition
NAME	SMITH, GEORGE S JR		3.2 NAME	''
\$TREET ADDRESS	1515 BROADWAY		33 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10036		34 CITY-ST-ZIP	<u> </u>
TITLE	EVSD	[   DELETE	4 1 TiTLF	[   Change [ ] Addition
NAME	DAUMAN, PHILIPPE P		4.2 NAME	
STREET ADDRESS	1515 BROADWAY		435*REET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10036	Lineser	4.4 CITY-ST-ZIP	\ \ \ \langle
TITLE	CTACK HEATE MA	(_) DELETE	51 TILE 52 NAME	Change [ ] Addition
NAME OTDEET ADDRESS	STACK, ILENE W		53 STREET ADDRESS	
STREET ADDRESS	1515 BROADWAY		54 OTY-S1-ZIP	
CITY-ST-ZP TITLE	NEW YORK NY 10036	[] DELETE	61 TITLE	AS [ Change   Addition
NAME		_ , beter	6.2 NAME	LIOTTA, MICHAEL A
STREET ADDRESS		4	63STHEFT ADDRESS	1515 BROADWAY

6.4 C(1Y-S1-Z(F) 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

1/29/99

Date

NEW YORK NY 10036

212-846-5955 Daytone Prione #