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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000015745 (1)

CARROLLWOOD VIDEO, INC.

FILED Apr 25 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 1841 COMMERCE AVENUE NORTH 1641 COMMERCE AVENUE NORTH ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716										
							3. Date Incorporated or Qualified 03/02/1993		le of Last F 9/1996	leport
	Place of Business	<u></u> ⊢¬	2a. Mailing Address				4. FEI Number		1 1	pplied For
Suite, Apt.	# ato	26	Suite. Apt. #. etc.				59-3167626			ol Applicable
22	·	27					5. Certificate of Status Desired		Fee R	Additional equired
City & Stat	l e	<u> </u>	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country 25	Zip		Coun	try		8. This corporation has liability for it		tax under s	
24	25 9. Name and Address of Curre	29] ent Registere	d Agent	30			Florida Statutes 22 10. Name and Address of New Reg	Yes [·
KOL	ENDA, JOHN F.	on negletere	o Agoin		31	Name	10. Name and Address of New You	Aisteren W	Agur	
	ENDA, JUHN F. I COMMERCE AVENUE NORTH									
	PETERSBURG FL 33716			{	32	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
1				Ε	3					
				-	14	City			85 Zip	Code
								FL	'	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1	508, Florida Stal	lutes, the abo	ove- by	named co	poration submits this statement for the p	urpose of	changing i	ts registered
11. Pursuant to the provisions of Soctions 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 printed hame of registered a	nont part tills if av	London /N	OIC Desistance	Laurel	nional no tan	uired when reinstating)	DATE		
12.		ND DIRECTOR		13.	-cycun	r signature requ	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	3S IN 12
TITLE	D		DELETE	1.1 10L	E	T		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	KOLENDA, JOHN F			1 2 NAM	I E					
STREET ADDRESS	700 APALACHEE DR. NE			13 STRI	LET A	.DDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33702			14 007	- \$1	- ZiP				
TITLE	D		L DELETE	21 1811	ŀ				Change	Addition
NAME	DAVIES, JOHANNA A			5.5 NAM	IE					
STREET ADDRESS	6800 13TH AVE N ST. PETERSBURG FL					ODRESS				
CITY-ST-ZIP TITLE	SI. PETENSBUNG PL		DELETE	2 4 CIT		- ZIP			Change	Addition
NAME				3.1 TITU					Gila⊹iye	Addition
STREET ADDRESS				3.2 NAM 3.3 STRE		DUBLEC				
CITY-ST-ZIP				3.4 CITY						
TITLE			DELETE	4.1 7111					Change	☐ Addition
NAME				4. 2 NAN	ΛE					
STREET ADDRESS				4.3 STR	£1 A	DORESS				
CITY-ST-ZIP				4.4 CITY	-\$1-	· 21P				
TITLE			DELETE	5.1 TITL	F				Change	Addition
NAME				5.2 NAM	E	1				
STREET ADDRESS				5.3 STRE	ÉLA	DDRESS				
CITY-ST-ZIP				5.4 CITY		ZIP				
TITLE			DELETE	6.1 TITL					Change	Addition
NAME				6.2 NAM						
STREET ADDRESS				- 1		DDRESS				
CITY-ST-ZIP	L			64 CITY	-\$1-	719				

14. I do 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 is the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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.

CIGNATUDE.