2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 17, 2004 8:00 am **Secretary of State** DOCUMENT # P93000024922 02-17-2004 90014 025 ***150.00 NOW SHOWING VIDEO, INC. Mailing Address Principal Place of Business 54007476 271 KEY DEER BLVD **271 KEY DEER BLVD** BIG PINE KEY, FL 33043 BIG PINE KEY, FL 33043 US No Chg-P CR2E034 (10/03) 02042004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0394794 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CAVATIO, PETER W DO NOT WRITE RT. 5 BOX 14 BIG PINE KEY, FL 33043 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 DATE (NOTE: Registered Agent signature required when reinstating) - Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS TITLE NAME CAVATAIO, PETER 30856 MINORCA DR STREET ADDRESS CITY-ST-ZIP BIG PINE KEY, FL TITLE CAVATAIO, ANTHANIA NAME STREET ADDRESS 30856 MINORCA DR BIG PINE KEY, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. 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 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 attac ent with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED