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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027785 (3)

VIDEO POWERHOUSE DISTRIBUTING COMPANY CORP.

Principal Place of Business Mailing Address 14114 SW 142 AVE. MIAMI FL 33186 14114 SW 142 AVE. **MIAMI FL 33186** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 NOT APPLICABLE 65-040864 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RACKEAR, GARY S 5975 SUNSET DR., STE. 302 82 Street Address (P.O. Box Number is Not Acceptable) **SOUTH MIAMI FL 33143** 83 Zip Code 85 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 printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition RODRIGUEZ, RAUL MALIF 1.2 NAME 14114 SW 142 AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CiTY-ST-ZIP DELETE Channe Addition 4.1 TATLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

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 suppliemental 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 to stee impowered 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 attact man with fur juddress.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

03/16/98

(305)254-4400

Change

Addition

**FILED** 

Mar 30 1998 8:00am

Secretary of State