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

PROFIT CORPORATION ANNUAL REPORT

1998



LUORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 29 1998 8:00am

Secretary of State

DOCUMENT #

P94000017136 (0)

BETTER HOME ENTERTAINMENT, INC.

Principal Plac	e of Business	Mailing Address		i akkulbat iin tärii nikii musii muisi kariii dhii	ı işüşe iddəl tibad tiriş bili iber
1530 KINGSLEY AVE		1530 KINGSLEY AVE			
SUITE 7		SUITE 7		DO NOT MOTE IN T	HO DDA OF
ORANGE PARK FL 32073 US		ORANGE PARK FL 320: US	73	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
40		US		•	
2. Principal P	lace of Business	2a. Mailing Address		03/04/1994 4. FEI Number	Applied For
21		26		.	Applied For Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		59-3230222	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	B	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Register	red Agent
NO	rman P. Freedman		81 Name		-
525	N NEWNAN ST		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
SU	ITE 7		L. L		
JAC	CK80NVILLE FL 32202		83		
			84 City		85 Zip Code
44 5	the state of the s	An 1 11 Ann 1 Ann 17			Zip code
office or re	e giste red agent, or both, in the Stat	e of Florida, Such change was	ites, the above-hamed cor authorized by the corpora	poration submits this statement for the purposition's board of directors. Thereby accept the	appointment as registered
age nt. I a	m ifa miliar with, and accept the obliq	gations of, Section 607.05 0 5, f	lorida Statutes	,	
SIGNATURE	Signature, typical or priored name of respectives for		HE Registered Agent signature mad		
12.		ND DIRECTORS	13.	ired when reinstating) DAI ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	☐ OFLETE	1.1 TITLE	A SOLITO CONTROLL OF THE CONTROLL OF THE CONTROL OF	Change Addition
NAME	HURLEY, KEVIN S.		1.2 NAME		
STREET ADDRESS	1530 KINGSLEY AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL		1.4 CHY-S1-ZIP		
TITLE	S T	DETETE	2 1 TITLE		Change Addition
NAME	HURLEY, LORI		22 NAME		-
STREET ADDRESS	1530 KINGSLEY AVE		23 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 \$1RFFT ADDRESS		
CITY-ST-ZIP			3.4. C(1)Y - S1 - Z(P		
TITLE		☐ DCTLIE	4.1 TITI.E		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE		☐ DELFTE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY+S1+ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
A174 AT 710			I		1

14. Thereby 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 transfer in the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual transfer 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 requiremental 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 requiremental annual report is true.