FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000056947 (2)**

1. Corporation Name

VIDEOPROM INT'L., CORP.

Principal Place of Business	Mailing Address
4744 SW 74 AVE MIAMI FL 33155 US	4744 SW 74 AVE MIAMI FL 33155 US

3. Date Incorporated or Qualified: **08/02/1994**
3a. Date of Last Report: **04/18/1995**

4. FEI Number: **65-0508838** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 6175 NW 167TH ST	26 1701 NW 96TH TER.
Suite, Apt. #, etc. 22 SUITE G-40	Suite, Apt. #, etc. 27 #B
City & State 23 MIAMI, FL	City & State 28 PEMBROKE PINES, FL
Zip 24 33015 Country 25 U.S.A.	Zip 29 33024 Country 30 U.S.A.

9. Name and Address of Current Registered Agent

MORENO, ANTONIO J.
6332 S.W. 151ST PLACE
MIAMI FL 33193

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1701 NW 96TH TER #B
83
84 City PEMBROKE PINES **FL** 85 Zip Code 33024

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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: ANTONIO MORENO, PRESIDENT DATE: 4/25/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	MORENO, ANTONIO J.		1.2 NAME	MORENO, ANTONIO J.
STREET ADDRESS	6332 S.W. 151ST PLACE		1.3 STREET ADDRESS	1701 NW 96TH TER #B
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33024
TITLE	VD	☐ DELETE	2.1 TITLE	VD ☒ Change ☐ Addition
NAME	MORENO, GUSTAVO		2.2 NAME	MORENO, GUSTAVO
STREET ADDRESS	6332 S.W. 151ST PLACE		2.3 STREET ADDRESS	7585 SW 152 AV #203
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI, FL 33193
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	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 added by amendment, with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4/25/96 — Daytime Phone #: 305-822-2666

CR2E034 (12/95)