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FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

8175 NW 187TH STREET
SUITE G-40
MIAMI FL 33015
US

Mailing Address

1701 NW 96TH TERRACE
SUITE B
PEMBROKE PINES FL 33024-3018
US



2. Principal Place of Business

21 9907 NW 20TH STREET

Suite, Apt. #, etc.

22 City & State
23 PEMBROKE PINES, FL

24 Zip 33024 25 Country USA

2a. Mailing Address

26 9907 NW 20TH STREET

Suite, Apt. #, etc.

27 City & State
28 PEMBROKE PINES, FL

29 Zip 33024 30 Country USA

3. Date incorporated or Qualified
08/02/1994

3a. Date of Last Report
05/01/1996

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

9. Name and Address of Current Registered Agent

MORENO, ANTONIO J.
1701 NW 96TH TERRACE
SUITE B
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

81 Name MORENO, ANTONIO J.
82 Street Address (P.O. Box Number is Not Acceptable)
9907 NW 20TH ST
83
84 City PEMBROKE PINES FL 85 Zip Code 33024

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME MORENO, ANTONIO J.
STREET ADDRESS 1701 N W96TH TERRACE #B
CITY-ST-ZIP PEMBROKE PINES FL

TITLE VD ☒ DELETE

NAME MORENO, GUSTAVO
STREET ADDRESS 7585 SW 152 AVENUE #203
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME MORENO, ANTONIO J.
1.3 STREET ADDRESS 9907 NW 20TH ST
1.4 CITY-ST-ZIP PEMBROKE PINES, FL 33024

2.1 TITLE VD ☐ Change ☒ Addition

2.2 NAME MORENO, MARIA J
2.3 STREET ADDRESS 9907 NW 20TH ST
2.4 CITY-ST-ZIP PEMBROKE PINES, FL 33024

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 executor 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 in a new block with an address.

SIGNATURE:

4/15/97 954-4509119

CR2E034 (9/96)