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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000058976 (9) i. Corporation Name

VIDEO EXPRESS SYSTEMS INC.						
Principal Plac	e of Business	Mailing Addre	ess		- I IODAIOUR IID AUTEL DAOIR MOIRE DURIL OURIL AGAU	0 03 3 0 0 0 0 0 0 0
190 IVES DAIRY RD. 190 IVES DAIRY RD.						
#200 #200					DO NOT WRITE IN TH	HE CDACE
N MIAMI BEACH FL 33179 N MIAMI BEACH FL 33179				3. Date Incorporated or Qualified	ווס פראטב	
					08/08/1994	
2. Principal P	lace of Business	2a. Mailing Ad	Idress		4. FEI Number	Applied For
21	21		26		65-0513569	Not Applicable
Suite, Apt. #, etc.		Suite, Apt	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27	· · · · · · · · · · · · · · · · · · ·		o. Obrimosto of States Desired	Fee Required
City & State	Đ	h	City & Stato		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip		Country	Trust Fund Contribution	Added to Fees
24	25	29	30	-n '	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur			<u>′</u>	10. Name and Address of New Registers	
BERMAN, JESSICA R				81 Name		
250 BRADLEY PLACE 403				82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
PA	LM BEACH FL 33480					
,	•			83		
				B4 City		85 Zip Code
44 D					F	
office or r	egistered agent, or both, in the St	ate of Florida. Such ch	ange was auti	the above-hamed corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the a	e of changing its registered appointment as registered
ł	m familiar with, and accept the ob	ligations of, Section 6	07.0505, Florid	la Slatutes.		
SIGNATURE	Signature, typed or printed name of registered	agont and title if applicable	(NOTE: B	egistered Agent signature require	d when reinstating) DATI	E
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST		DELETE	1.1 TITLE		Change Addition
NAME	BERMAN, JESSICA			1.2 NAME		
STREET ADDRESS	250 BRADLEY PLACE 403			1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH FL		DE LEE	1.4 CITY-ST-ZIP		Chance D Addison
TITLE		U	DELETE	2.1 TITLE		Change Addition
NAME OXOCCT ADDOCCC	I DOCTOR		2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-ZIP			DELETE	2. 4 CITY-ST-ZIP 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	400000000	Change Addition
NAME				. 5.2 NAME	400 0025201 -05/12/9801042	L 1514 .010
STREET ADDRESS				5.3 STREET ADDRESS	***150.00	.n10
CITY-ST-ZIP			DELETE	5.4 CITY-ST-ZIP		
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		W (12)

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 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 on an attachment with an address.

6.3 STREET ADDRESS

CICNATURE.

STREET ADDRESS

Dering Bern

4-23-08

3056514550

FILED

May 07 1998 8:00am

Secretary of State

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