FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 24 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000072105 (7)**

1. Corporation Name
PLAZA BOOK & VIDEO, INC.

Principal Place of Business	Mailing Address
6709 A BUCKEYE COURT TAMARAC FL 33319	6709 A BUCKEYE COURT TAMARAC FL 33319

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/26/1994
3a. Date of Last Report:

2. Principal Place of Business
21: 6097 A Buckeye Ct
22: Suite, Apt. #, etc.
23: City & State: Tamarac FL
24: Zip: 33319 25: Country: USA

2a. Mailing Address
26: 6097 A Buckeye Ct
27: Suite, Apt. #, etc.
28: City & State: Tamarac FL
29: Zip: 33319 30: Country: USA

4. FEI Number: 65-0527661 ☐ 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

POLLACK, MARC R
1776 NORTH PINE ISLAND ROAD
SUITE 208
PLANTATION FL 33322

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

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: Jay Work Pres. 4/10/95 Jay Work
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	WORK, JAY	12 NAME	
STREET ADDRESS	6097 A BUCKEYE COURT	13 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL 33319	14 CITY-ST-ZIP	
TITLE	SVD	21 TITLE	☐ Change ☐ Addition
NAME	WORK, DEBBIE	22 NAME	
STREET ADDRESS	6097 A BUCKEYE COURT	23 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL 33319	24 CITY-ST-ZIP	
TITLE	VPD	31 TITLE	☐ Change ☐ Addition
NAME	MICHAEL GOLDSTEIN	32 NAME	
STREET ADDRESS	12224 NW 30 MNR.	33 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE, FLA 33323	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	LINDA GOLDSTEIN	42 NAME	
STREET ADDRESS	12224 NW 30 MNR	43 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE, FLA 33323	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 on an attachment with an address.

SIGNATURE: Jay Work 4/10/95 305-720-7226
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

Jay Work

0433036 FP