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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400080297

1. Corporation Name

HOCEVAR VIDEO, INC.

Principal Place of Business
3045 S. PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32082

Mailing Address

3045 S. PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32082

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90138 039 ***150.00



DO NOT WRITE IN THIS SPACE

					1 17/12/1994				
Dringinal D	ace of Business	2a. Mailing Address			11/02/1994 4. FEI Number		Applied	For	
. Fillicipal F	ace of business	26			65-0542055		Not App	olicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	* * * * * * * * * * * * * * * * * * * *	\$8.75 Additional Fee Required		
City & Stat		City & State		•	6. Election Campaign Financing S5.00 May Be				
City & State		28			Trust Fund Contribution - Added to Fees				
Zip Country		Zip Cou		try	This corporation owes the current y Personal Property Tax.	ear Intangible Yes⊟	□N	lo	
4 25			30		10. Name and Address of New Registered Agent				
	9. Name and Address of Current	Registered Agent		B1 Name	10, Italia alia riadiasa				
HOC	EVAR, LOUIS		L						
	S. PONTE VEDRA BLVD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)				
	TE VEDRA BEACH FL 32082		-	83					
FUN	TE VEDINA BEACHT E 02002			03					
			ļ	84 City	1, <u>1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1</u>	FL 85	Zip Code	1	
office or r	egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florida. Such change was au ons of, Section 607.0505, Flor	ida Statu	by the corporation	poration submits this statement for the purpon's board of directors. I hereby accept the	appointment a	is registe	red	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	registered /	rgent signature require			OTOBE	IN 12	
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12.		DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFICE	RS AND DIRE			
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indicated on this annual report or suppermental annual report is due and accurate and that my signature shall have the same legal effect 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR