FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

	1996	1900 J	OF CORPOR		ONS						
1. Corporatio	MENT # P950 n Name R VIDEO WEST, INC.	1 (18 1/18 1/18) 4/8 (18 1/18 1/18 1/18 1/18 1/18 1/18 1/1	11 /11 11 /12 1/		ŠÍ AÐAIÐ TÐU LÐAL						
Principal Place	on Fusinose	Mailing Address									
	KIE HIGHWAY STE 12	3100 SO. DIXIE HIGI	LIMAY STE 15	2							
BOCA RATO		BOCA RATON FL 33		•							
						3. Date Incorporated or Qualified 04/10/1995	3a. Dat	e of Last F	Report		
	cipal Place of Business 2a, Mailing Address					4. FE! Number			Applied For		
Suite, Ant.						65-0572796			Not Applicable		
22		27				5. Certificate of Status Desired			5 Additional Required		
City & State 23	1971 138 AAAA ahaa shaaraa gaaga qaayaa ahaa ka ahaa ahaa ahaa ahaa ahaa a	City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	May Be		
Zip 24	Country 25	2up 29]	30 Gou	intry	,	8. This corporation has liability for		ax under s	199.032,		
7	9. Name and Address of Cur		30	Γ		Florida Statutes Yes 10, Name and Address of New F	□ No	Annel			
)				81	Name	10, Aunto and Addition of How P	chieroien	Agent			
	GOODMAN, ROBERT				2 Street Address (P.O. Box Number is Not Acceptable)						
	3100 SO. DIXIE HIGHWAY STE 12					Street Address (P.O. Box Number is Not Acceptable)					
BOCA R	ATON FL 33432			83							
				84	City		·	85 Zi	p Code		
11. Pursuant I	to the provisions of Sections 607 09	502 and 607 1508. Florida Stat	ides the abo		amod coroo	ention or through this statement for the an	FL				
or register familiar wi	ed agent, or both, in the State of Fi th, and accept the obligations of, S	lorida. Such change was autho action 607 0505. Florida Statut	rized by the c	corp	oration's boa	ration submits this statement for the pur ard of directors. I hereby accept the appi	pose of cha pintment as	anging its i registerec	registered offici Lagent, Fam		
SIGNATURE	Deat Louting Ro	BELL GOODAN	O.,.				بيليد	lac			
	signature, typed or printed name of registered as	goril and title I' applicatie.		Agen	r. signature require	ed when reinstating)	DYJE T	176	****		
12, Title	OFFICERS A	AND DIRECTORS DELETE	13.	*************		ADDITIONS/CHANGES TO OFF			****		
NAMÉ	GOODMAN, ROBERT	ן) טנגנונ	111				i	Change	Addition		
STREET ADDRESS	3100 SO. DIXIE HIGHWAY	STF 12	1.2 NA		ADDRESS						
CITY - ST- ZIP	BOCA RATON FL 33432		1.4 Ci								
TITLE		[] DELETE	2.11				Г	Change	☐ Addition		
NAME			2.2 NA	ΝE	İ		•				
STREET ADDRESS			2.3 S1	REET	ADDRESS						
CrTY - ST - ZIP		F"\ b. (24 CI	•							
THLE NAME		() DELETE	3. 1 1.		¥2		. [Change	Addition		
STREET ADDRESS			3.2 NA		ADDRESS						
City - St - ZiP			3.4 CIT		1						
TILLE		DELETE	4. 1 10				7] Change	Addition		
NAME			4.2 NA	ME			_	-			
STREET ADDRESS			43.51	REET	ADDRESS	4 <u>0000018</u> 3	gga.	74			
CHY-ST-ZIP	<u>) </u>	P3 or ex	4.4.CII		I · ZIP	40000183 05/23/96010 ***200.00	0304	4			
TITLE NAME		DETETE	5 1 111			***200.00		Change	Addition		
STREET ADDRESS			5 2 NA		ADDRESS						
CITY - ST - ZIP					ADDRESS						
TITLE		DELETE	5.4 C/T 6. 1 T/)		- 215	THE RESIDENCE OF THE PROPERTY OF THE PERSON	<u>_</u>] Change	Addition		
NAME			6.2 NAI				L.		37/-		
STREET ADDRESS					ADDRESS				2.1		

64 CITY-ST-ZIP

14. To hereby cortify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGH

ROBERT GOODMAN

4/25/96

407-394-8384