## 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 # P95000028089 (7)

ROMOR VIDEO WEST, INC.

Principal	Place	of	Business
-----------	-------	----	----------

Mailing Address

## FILED Jan 16 1998 8:00am Secretary of State



0400 00 00	NE INOLINIAL OPP 40						
3100 SO. DIXIE HIGHWAY STE 12 BOCA RATON FL 33432 BOCA RATON FL 33432							
יייייייייייייייייייייייייייייייייייייי		DOOR HAIDH IL 1990E			DO NOT WRI	TE IN THIS SPACE	
				Ī	3. Date Incorporated or Qualified	l	
					04/10/1995		
	lace of Business	2a. Mailing Address		-	4. FEI Number		Applied For
	TOM- A-TOE RD	28 1961 TOM-1	1- TOE K	 b'	65-0572796		Not Applicable
Suite, Apt.	# <b>, et</b> c.	Suite, Apt. #, etc.		]	5. Certificate of Status Desired	T	75 Additional
22		Cutu P. State				1.5	ee Required
'	City & State  City & State  LANTANA FL  28 LANTANK FL				6. Election Campaign Financing		.00 May Be
Zip	Country	28 LANTANK, FL	Country		Trust Fund Contribution		Ided to Fees
24] Š3462·		29 33462-5017 3		s, l	<ol> <li>This corporation owes or has personal Property Tax due Jur</li> </ol>		ar Intangibie
24 33 100	9. Name and Address of Current		<u> </u>		10. Name and Address of New F		
GO	ODMAN, ROBERT		81 Na	ame			
	00 <b>\$</b> 0. DIXIE HIGHWAY STE 12		-	600	DMAN PUBERT		
	CA RATON FL 33432		<b>82</b> St	reet Addres:	s (P.O. Box Number is Not Accepta	able)	
50	ON 11/1 ON 1 L 00432		83	1 101 1			
			<b>84</b> Cit	"LANTA	ENA-		Zip Code 33462~5017
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-nar	med corpora	ation submits this statement for the	purpose of chang	ing its registered
office or re	egistered agent, or both, in the State on familiar with and accept the obligation	of Florida. Such change was autions of Section 607,0505. Florid	horized by the	corporation	's board of directors. I hereby acc	ept the appointmen	nt as registered
SIGNATURE	// A N= N/ // // //	BERT SOUCHAN			RUSS ONLY	1/5/42	
SIGNATURE	signature, typed or printed name of registered agent		Registered Agent sign	nature required v	when reinstating)	DATE	<del> </del>
12.	OFFICERS AND	DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFF	ICERS AND DIREC	CTORS IN 12
TITLE	Ď	DELETE	1.1 TITLE		ODMAN, ROBERT	Cha	inge Addition
NAME	GOODMAN, ROBERT		1.2 NAME	196	of TOM-A-TOE !	SD.	
STREET ADDRESS	3100 SO. DIXIE HIGHWAY STE	12	1.3 STREET ADDR	RESS LA	NTANA, FL 3346	2-5017	
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CITY - ST - ZIP		J. 25.	· · ·	
TITLE		☐ DELETË	2.1 TITLE			☐ Cha	inge 🔲 Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDR	RESS			
CITY-ST-ZIP		• • • • • • • • • • • • • • • • • • •	2. 4 CITY+ST-ZIP	р			
TITLÉ		DELETE	3.1 TITLE			L. Cha	nge 🔲 Addition
NAME			3.2 NAME	1			
STREET ADDRESS			3.3 STREET ADDR	RESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP	<u> </u>		····	
TITLE		L_] DELETE	4.1 TITLE			∐ Cha	nge L. Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR	RESS			
CITY-ST-ZIP		Devere	4.4 CITY-ST-ZIP	<u> </u>	<del></del>		
TITLE		☐ DELETE	5.1 TITLE	İ		∐ Cha	nge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRI				
CITY-ST-ZIP		Lociete	5.4 CITY-ST-ZIP			T1 A."	
TITLE		☐ DELETE	6.1 TITLE			Cha	nge L Addition
NAME			6.2 NAME				İ
STREET ADDRESS			6.3 STREET ADDRE				
CITY-ST-ZIP	artify that the information aunolice with	this filing dogs not qualify for t	6.4 CITY-ST-ZIP		otion 110 07/9/i) Florido Statuto	I further contile the	the information
indicated (	ertify that the information supplied will on this annual report or supplemental	annual report is true and accura	ate and that my	v signature s	hall have the same legal effect as	if made under oath	n: that Lam an
officer or o	director of the corporation or the receiver Block 13 if changed, or on an attach	er or trustee empowered to exc	ocute this repor	rt as require	d by Chapter 607, Florida Statutes	; and that my name	e appears in
5.50K 1E C		D. 101 1 Pales Said	👝	ì	<i>t</i> .		
CICALAT		استكساحا الا	I LA	1144	ا دام۹	64 506.	. 79 <i>[</i> 7