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

*PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000040734

1. Corporation Name

VIDEO C	REATIONS, INC.											
Principal Place	of Business	Ma	ailing Address					# 100#1000) 140 3040) 0144 00#1	OBIN BUN OBIN B	i e il aalli	16611	
113 NORTH FEDERAL HIGHWAY P.O. BOX 1889 DANIA FL 33004 US US							DO NOT W	RITE IN THIS	SPACE			
								Date Incorporated or Qualife	ed			
								05/22/1995				
2. Principal Place of Business			2a. Mailing Address					4. FEI Number			Appl	lied For
21			26					65-0589253				Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certifcate of Status Desired		•	75 Ade Req	lditional uired
City & State			City & State					6. Election Campaign Financin	g 🖺	\$5.	.00 N	lay Be
23			28					Trust Fund Contribution		Add	ded to	Fees
Zip	Country		Zip	Cour	itry			8. This corporation owes the c	urrent year Inta		_	_
24	25	29		30				Personal Property Tax.		Yes		□No
	9. Name and Address of Curre	nt Regis	tered Agent		_		1	0. Name and Address of Nev	v Registered /	(gent		
4041	AC CERAID I				81	Name						
ADAMS, GERALD J				ŀ	82	Street Ad	ddress	(P.O. Box Number is Not Acce	ptable)			,
113 North Federal Highway Dania Fl 33004				-	83							
					4					Test	Zip Co	
					84	City			FL	85	Zip Cc	ode
office or re agent. I ar SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florid ations of,	da. Such change was a , Section 607.0505, Flo	authorized orida Statu	by ti	-named co the corpora	ation's	board of directors. I hereby acc	cept the appoir	manging itment a	y its regi	stered
12.	OFFICERS A			13.				ADDITIONS/CHANGES TO	OFFICERS AN	D DIRE	CTOF	
TITLE	PTS		☐ DELETE	1.1 TET	LE					☐ Cha	nge	Addition
NAME	FIORENTINO, FRANCESCO 1.21				ME							
STREET ADDRESS 730 W. HALLANDALE BEACH B				1.3 STI	REET	ADDRESS						
CITY-ST-ZIP	HALLANDALE FL 33009		1.4			-ZIP						
TITLE	VD		☐ DELETE	2.1 TT	LE					Cha	nge	Addition
NAME	FIORENTINO, FRANCESCO			2.2 NA	ME							
STREET ADDRESS	730 W. HALLANDALE BEACH	BLVD.		2.3 ST	REET	ADDRESS						
CITY-ST-ZIP	HALLANDALE FL			2. 4 CI	ry-st	Γ-ZIP						
TITLE			☐ DELETE	3.1 TIT	LE					Cha	nge	Addition
NAME				3.2 NA	ME							
STREET ADDRESS				3 3 ST	REET	ADDRESS						
CITY-ST-ZIP				3.4. CF	ry-st	r-ZIP						
TITLE			☐ DELETE	4 1 TIT	LE					Cha	inge	Addition
NAME				4. 2 NA	ME	j						
STREET ADDRESS				4 3 ST	REET	ADDRESS						
CITY-ST-ZIP				4.4 CIT	Y-ST	-ZIP						
TITLE			☐ DELETE	5.1 TIT						☐ Cha	nge	Addition
NAME				5.2 NA								
STREET ADDRESS				5.3 ST	REET	ADDRESS						
CITY-ST-ZIP				5.4 CIT		- ZIP						<u> </u>
TITLE			☐ DELETE	6.1 TIT	LE					Cha	nge	Addition

14. I hereby 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90206 031 ***150.00