FILE NOW: FILING FEE AFTER MAY 1 IS \$2\$5.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sand:a B Mortham
Scoretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P9500060015 (1)

VIDEO AMUSEMENTS OF FLORIDA, INC.

Principal Place of Business Mailing Address

5353 N. FEDERAL HIGHWAY, SUITE 405 5353 N. FEDERAL HIGHWAY, SUITE 405



FT. LAUDERDA	LE FL 33308	FT. LAUDERDALE FL 3	3308				
					3. Date incorporated or Qualified 08/03/1995	3a. Date of La	ast Report
2, Principal Plac	,	2a. Mairing Address			4. FEI Number 65-06029		Applied For
Suite, Apt. #, etc.		Suite Ant # oto	Suite, Apt. #, etc.		1		Not Applicable 3.75 Additional
22	City.	27			5. Certificate of Status Desired		Fee Required
City & State		Orty & State			6. Election Campaign Financing	5	5.00 May Be
23		28	p		Trust Fund Contribution		Added to Fees
Zip - 1	Country	Ζφ	Country	1	8. This corporation has liability for i	intangible tax und	ter s. 199.032,
24	25 9. Name and Address of Curre	nt Registered Agent	[30]		Florida Statutes Yes 10. Name and Address of New R		
5353 N. F	Thomas L Ederal Highway, Suite 40 Erdale Fl 33308		81 82 83		No HE lress (P.O. Box Number is Not Acceptab		
			84	City		F1 85	Zip Code
or registered familiar with S:GNATURE	the provisions of Sections 607.050 diagent, or both, in the State of Flor and accept the obligations of, Sec quality traditional or order transfer of experience again	ida, Such change was authorize Iron 607.0505, Florida Statutes	ed by the con	ooration's boa	ration submits this statement for the pur and of directors. Thereby accept the appro-	pose of changing continent as regis	g its registered office tered agent. Fam
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRE	CTORS IN 12
TITLE	D	□ DELETE	1. 1 LE	F		☐ Cha	ange 🔀 Addition
NAME	LASALLE, THOMAS L		1.2 N L1E	150	SUPH FERENKA 126 FIRST AVE		
STREET ADDRESS	5353 N. FEDERAL HIGHWAY	r, suite 405	1.3.5 EE	TADORESS 3	126 FIRST AVE		
CITY-ST ZIP	FT. LAUDERDALE FL 33308	["] DELFTE	140 2 1	St ZiP N	EW York, N.Y. 10029	□ Cr.	ange Addition
TITLE		L'I pere it	22				ings [] Addition
NAME STREET ADDRESS				LADDRESS			
City-St-Zif-				ST-ZIP			
THE		☐ DELETE	3	<u> </u>		☐ Ch	ange 🔲 Addition
NAME			3.2				
STREET ADDRESS			3.3	T ADDRESS			
CHY-\$1-ZIP			3:	IT-ZIF			
THEE		☐ DELETE	4			□ Cn	ange 🔲 Addition 🚶
NAME			4	LADORESS			
STREET ADORESS				SI-ZIF			
CITY-S1-ZIF		[] DELETE	5 1	51.71		☐ Ch.	ange [] Addition
MAME		berry 4	5.2				
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011Y-ST-Z-P			540	\$1 - ZIP			
TITLE		☐ DELETE	6 1 T F			☐ Cn	ange 🔲 Addition
NAME			62 N				
STREET ADDRESS			63 ST - E	1 ADDRESS			
CITY S' 7iF				ST Z	for the assumption chited in Coolea 110	ožinal traidas	Statutae I fudbor
certily that to eath; that I	the information indicated on this and am an officer or director of the corp Block 12 or Block 13 c changed, or	iua repoil or supplemental ann orition of the receiver of truste	ual report is tr e empowered	uejand ac y tir	for the exemption stated in Section 119 ate and that my signature shall have the iss report as required by Chapter 607, Fi	-samo legal effec	t as if made under 🔝 📗