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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P95000080649 (3)

DIGITAL VIDEO ENTERPRISES, INC.

1			•		
Principal Place of Business Mailing Address  2261 CHERRY PALM RD  BOCA RATON FL 33432 BOCA RATON FL 33432-7 US			7989	- I TORTHOUGH THE TOTOL OTHER BOTTLE	
.,				3. Date Incorporated or Qualified 10/18/1995	3a. Date of Last Report 05/01/1996
2. Principal Pi	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0614768	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State 23	В	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in	
	9. Name and Address of Current IEN, PATRICIA V ESQ		81 Name	10. Name and Address of New Regi	
11. Pursuant office or ragent. I a	E-PALMETTO PARK-RD 226.  CA RATON FL 33432  to the provisions of Sections 607.050; egistered agont, or both, in the State of familiar with, and accept the obligations.	? and 607.1508, Florida Statu of Florida, Such change was	84 City  les, the above-named cor authorized by the corpora	poration submits this statement for the putition's board of directors. I hereby accept	FL 85 Zip Code
SIGNATURE	Signalure, typed or printed name of registered ager	nt and title if applicable. (NO	Tf : Regislered Agent signature requ	red when roinstating)	DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IOANNOU, GEORGE 318 E PALMETTO PARK RD BOCA RATON FL 33432	_	1.1 TITUE 1.2 NANE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	261 Cherry Palmk	≥ Change [.] Addilion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COHEN, PATRICIA V 318 E PALMETTO PARK RD BOCA RATON FL 33432	☐ DELETE	2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 CIT   - ST-ZIP	261 Cherry Palm Ro	Sychange El Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3 1		Change Addillon
TITLE NAME STREET ADDRESS		☐ DELETE	4.1 1114 4.2 NA 4.3 \$1F ADDRESS 4.4 \$1T 11-21P		☐ Change ☐ Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		DELETE	5.1 1(1) 5.2 NAI 5.3 \$TR   ADDRESS   5.4 QTT   - 7IP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	6.1 TIT '6.2 NA 6.3 ST DDRESS 6.4 QT ZIP		Change Addition
Informatio	by certify that the Information supplier on Indicated on this annual report or s fficer or director of the corporation or n Block 12 or Block 13 if changed, or	upplemental annual report is the receiver or trustee empo	true and a late and that wered to be let this repo	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal of rl as required by Chapter 607, Florida Sta	effect as if made under oath; that

**FILED** 

May 08 1997 8:00am

Secretary of State