

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000084711 (7)

1. Corporation Name

A.P. VIDEO PRODUCTIONS, INC.



Principal Place of Business

7808 NW 67 AVE  
TAMARAC FL 33321

Mailing Address

7808 NW 67 AVE  
TAMARAC FL 33321

3. Date Incorporated or Qualified  
11/02/1995

3a. Date of Last Report

2. Principal Place of Business

21 1518 N Dixie Hwy

Suite, Apt. #, etc.

22 City & State

23 Hollywood, FL

Zip

24 33020

Country

25 USA

2a. Mailing Address

26 1518 N Dixie Hwy

Suite, Apt. #, etc.

27 City & State

28 Hollywood, FL

Zip

29 33020

Country

30 USA

4. FEI Number

65-0608163

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PINO, NEREIDA  
7808 NW 67 AVE  
TAMARAC FL 33321

81 Name Pino, Alejandro  
82 Street Address (P.O. Box Number is Not Acceptable)  
1518 N Dixie Hwy  
83  
84 City Hollywood FL 85 Zip Code 33020

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

DATE Registered Agent Signature required when changing

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME PINO, ALEJANDRO  
STREET ADDRESS 7808 NW 67 AVE  
CITY-ST-ZIP TAMARAC FL 33321

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

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TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SIGNATURE: Annette Pino Annette Pino  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE D/D/M  
12 NAME Pino, Alejandro  
13 STREET ADDRESS 7808 NW 67 AVE  
14 CITY-ST-ZIP Tamarac, FL 33321

☐ Change ☒ Addition

21 TITLE Norori, Luis  
22 NAME  
23 STREET ADDRESS 6260 Portsmouth Lane  
24 CITY-ST-ZIP Dayle, FL 33331

☐ Change ☒ Addition

31 TITLE T/S  
32 NAME Pino, Annette  
33 STREET ADDRESS 7808 NW 67 AVE  
34 CITY-ST-ZIP Tamarac FL 33321

☐ Change ☒ Addition

41 TITLE D  
42 NAME Nereida Pino  
43 STREET ADDRESS 7808 NW 67th Ave.  
44 CITY-ST-ZIP Tamarac, FL 33321

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS 900001830079  
54 CITY-ST-ZIP -05/20/96--01062--025

☐ Change ☐ Addition

61 TITLE \*\*\*200.00

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished 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.

3/9/96 9509273186  
SG 5-1-96

CR2E034 (12/95)