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Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # P96000005936 (5)

1. Corporation Name
PRELUDE HOME VIDEO, INC.



Principal Place of Business: **2830 WILDERNESS RD WEST PALM BEACH FL 33409**
 Mailing Address: **2830 WILDERNESS RD WEST PALM BEACH FL 33409-2027**

3. Date Incorporated or Qualified: **01/19/1996** 3a. Date of Last Report
 4. FEI Number: **65-0648739** 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

2. Principal Place of Business: **1822 Breakers W. Ct.**
 2a. Mailing Address: **1822 Breakers W. Ct.**
 22. City & State: **W. Palm Beach, FL**
 27. City & State: **W. Palm Beach, FL**
 23. Zip: **33411** Country: **U.S.A.**
 29. Zip: **33411** 30. Country: **U.S.A.**

9. Name and Address of Current Registered Agent: **KOCH, MARK W 2830 WILDERNESS RD WEST PALM BEACH FL 33409**
 10. Name and Address of New Registered Agent:
 81 Name: **KOCH, MARK W.**
 82 Street Address (P.O. Box Number is Not Acceptable): **1822 Breakers West Ct.**
 83
 84 City: **W. Palm Beach, FL** 85 Zip Code: **33411**

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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: <input type="checkbox"/> DELETE 1.2 NAME: KOCH, MARK W. 1.3 STREET ADDRESS: 2830 WILDERNESS RD 1.4 CITY-ST-ZIP: WEST PALM BEACH FL 33409	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	2.1 TITLE: <input type="checkbox"/> DELETE 2.2 NAME: KOCH, MARK W. 2.3 STREET ADDRESS: 1822 Breakers West Ct. 2.4 CITY-ST-ZIP: W. Palm Beach, FL 33411	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE: <input type="checkbox"/> DELETE 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.1 TITLE: <input type="checkbox"/> DELETE 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE: <input type="checkbox"/> DELETE 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.1 TITLE: <input type="checkbox"/> DELETE 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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.

SIGNATURE: _____ DATE: **3-10-97**

CR2E034 (9/96)