SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000029982 (1)

VIDEO NEWS, INC.

Principal Place of Business

Mailing Address

10625 F. COLONIAL DRIVE

FILED Aug 20 1998 8:00am Secretary of State



ORLANDO FL 32817 ORLANDO FL 32817							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					04/01/1996		
	Place of Business	2a. Mailing Address		2112	4. FEI Number	Applied For	
21 1760	MCCULLOCH RD		ントト	XH R	59-3384434	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 Additional	
27					V. Commodio of Claras Dosinos	Fee Required	
City & State City & State				•	6. Election Campaign Financing	\$5.00 May Be	
23 OVIEDO, FL 28 WIEDO, FL					Trust Fund Contribution	Added to Fees	
Zip 2 2 7 (Country 2 2ip 2 2) (Country 3 2 2) (Country 3 2							
24 30 765 25 SEVI NOCE 29 30 SEMINOCE Personal Property Tax due June 30. Yes No							
9. Name and Address of Current Registered Agent RROWN DON I 81 Name					10. Name and Address of New Registered	Agent	
BROWN, DON L				I Name			
200 N THORNTON AVE			82	82 Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32801			83				
			63	•	•		
			84	City	Fi	85 Zip Code	
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!							
12.	Signature, typed or printed name of registered agent a OFFICERS AND			gent signature rec	quired when reinstating) DATE	D DIDECTORO IN 40	
TITLE	D OFFICERS AND	F-1	13.		ADDITIONS/CHANGES TO OFFICERS AN	—	
NAME	NGUYEN, THONG	L DELETE	1.2 NAME		ļ	Change Addition	
STREET ADDRESS	1760 MCCULLOCH RD			LADDOCCO			
CITY-ST-ZIP	OVIEDO FL 32765			ADDRESS			
TITLE	D	Decrete	1.4 CITY-S 2.1 TITLE	I-ZIP		Т	
NAME	NGUYEN, NGOC	☐ DELETE	2.2 NAME		•	Change Addition	
STREET ADDRESS	1181 SPRINGVIEW RUN		2.3 STREET	ADDDEED			
CITY-ST-ZIP	WINTER PARK FL 32792		2.4 CITY-\$				
TITLE	THE SELECTION OF THE SE	DELETE	3.1 TITLE	1-21		70	
NAME			3.2 NAME		·	Change Addition	
STREET ADORESS			3.9 STREET	ANNDESS			
CITY-ST-ZIP			3.4 CITY-S				
TITLE		DELETE	4.1 TITLE	1-6.15		Channe Lader	
NAME		firm Deterie	4.2 NAME	}	·	Change Addition	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				
TITLE		DELETE	5.1 TITLE	72.77		Change Addition	
NAME		☐ NECE IE	5.2 NAME		ı	Change Addition	
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S1				
TITLE		DELETE	6.1 TITLE	-2.17		06	
NAME		□ DETE LE	6.2 NAME	İ	ι	Change Addition	
STREET ADDRESS			6.3 STREET	ADDRESS			
				1			
CITY-ST-ZIP			6.4 CITY-ST	-ZIP			

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 changes, or on an attachment with an address.

1120100