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Apr 18 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 # P96000038550 (5)

1. Corporation Name  
R & M VIDEOS, INC.

Principal Place of Business  
1540 N POWERLINE RD  
POMPANO BEACH FL 33069

Mailing Address  
1540 N POWERLINE RD  
POMPANO BEACH FL 33069-1621



3. Date Incorporated or Qualified 04/22/1996  
3a. Date of Last Report

2. Principal Place of Business  
21 1520 S. POWERLINE RD  
Suite, Apt. #, etc.  
22 SUITE F  
City & State  
23 DEERFIELD BCH, FL  
Zip Country  
24 33442 25 USA

2a. Mailing Address  
26 1520 S. POWERLINE RD.  
Suite, Apt. #, etc.  
27 SUITE F  
City & State  
28 DEERFIELD BCH, FL  
Zip Country  
29 33442 30 USA

4. FEI Number 65-0710521  
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

JOY, JOHN P  
2 S BISCAYNE BLVD 25TH FLOOR  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	SUMON, RAY	1.2 NAME	
STREET ADDRESS	6323 NW 26TH TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33496	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	VP
NAME	SUMON, MIKE	2.2 NAME	SUMON, MIKE
STREET ADDRESS	1540 N POWERLINE RD	2.3 STREET ADDRESS	1520 S. POWERLINE RD SUITE F
CITY-ST-ZIP	POMPANO BEACH FL 33069	2.4 CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: MIKE SUMON MIKE SUMON 4/15/97 (954) 574-9660  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/96)