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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani 🗸 🦠

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000042249 (8)

AUDIO VIDEO SPECIALTIES, INC.

## **FILED** Apr 18 1997 8:00am Secretary of State

Principal Place	of Business	Mailing A	Mailing Address				1 16 6410 BJ 149 1611 B DJIII B B III B B II			£ 1015 1001	
			144 COMMERCIAL WAY SPRING HILL FL 34606-5366								
							3. Date Incorporated or Qualified 05/10/1996	3a. D	ate of Last F	leport	
2. Principal Pl	2a. Mailing	ta, Mailing Address 6				4. FEI Number 59 - 3382 636		<del>-</del>	oplied For of Applicable		
Sulte, Apt. i		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional equired		
City & State	}	City &	State				6. Election Campaign Financing		\$5.00	May Be	
Zip	Country	<b>28</b> Zip		Coun			Trust Fund Contribution	<u> </u>		to Fees	
24	25	29		30	iu y		8. This corporation has liability for Florida Statutes	intangible ☑ Yes 【		. 199.032,	
<del></del>	9. Name and Address of Currer		gent	1001			10. Name and Address of New Re				
DAV	SON, JEFFREY K			1	B1	Name					
144	COMMERCIAL WAY				B2	Street Add	ress (P.O. Box Number is Not Acceptable)				
SPR	ING HILL FL 34606,			Ļ							
					B3						
	•			1	B4	City		FL	<b>85</b> Zip	Code	
11. Pursuant to	o the provisions of Sections 607,050	2 and 607.1508	. Florida Statut	es, the abo		named cor	poration submits this statement for the r		Changing it	s registered	
office or re	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida, Such ations of, Section	n change was n 607.0505. Fl	authorized orida Statu	by:	the corpora	poration submits this statement for the pation's board of directors. I hereby acce	ot the app	ointment as	registered	
SIGNATURE		a	00110000, 11	onoo olala							
	Signature, typed or printed name of registured ago		ole (NO)		Agen	l sigriature requ	ired when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS	Diverse	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND			
TITLE	DYNGUM IEEEDEA N		L) DELETE	1.1 1111		1			Change	Addition	
NAME STREET ADDRESS	DAVISON, JEFFREY K 144 COMMERCIAL, WAY			1.2 NAN		Postes					
CITY-ST-ZIP	SPRING HILL FL 34606			1.3 STR		DDRESS 7LD					
TITLE	<u> </u>		DELETE	2.1 1171		- ZII			Change	Addition	
NAME				2.2 NAM	Æ	[			-	_	
STREET ADDRESS				2.3 STR	EET A	DDRESS					
CITY-ST-ZIP				2. 4 CIT	y - \$1	- ZIP					
TITLE			L DELETE	3.1 11TL	E				☐ Change	Addition	
NAME				3.2 NAN		}					
STREET ADDRESS						DDRESS					
CITY-ST-ZIP			DELETE	3.4. CIT		- ZIP			Change	Additions	
TITLE NAME			["] DEFEIE	4.1 TITU 4. 2 NAM			:		L Change	Addition	
STREET ADDRESS				1		DDRESS					
CITY-ST-ZIP				4.4 CITY							
TITLE			DELETE	51 TITL		-			Change	Addition	
NAME				5.2 NAM	1E	ĺ					
STREET ADDRESS				5.3 \$1R	EET A	DDRESS	* ************************************				
CITY-ST-ZIP			<b>,</b>	5.4 CITY	/-SI-	21P					
TITLE			DELETE	6.1 TITL	E		<del></del> -		Change	Addition	
NAME				62 NAM	AE						
STREET ADDRESS				6.3 STH	EET A	DDRESS					
14. I do hereb	y partiful that the information assessing	rl with this title -	door not aval	6.4 CITY			d in Coption 110 07/07/0 Flacida Contra	0   fee-th-	continue	1b.a	
information	n indicated on this annual report or s licer or director of the corporation of a Block 12 or Block 13 if changed of	upplemental an the receiver or r on an attachm	nual report is t trustee empow ent with an add	rue and ac rered to ex dress.	ecur	ate and tha te this repo	d in Section 119.07(3)(i). Florida Statute It my signature shall have the same lega Int as required by Chapter 607, Florida S	l effect as tatutes; a	: if made un	der oath; that name	