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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000052898 1. Corporation Name

APOLLO VIDEO, INC.

Principal Place of Busines	S
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Mailing Address

6428 U.S. 41 N

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90133 015 ***150.00



6428 U.S. 41 N APOLLO BEACH FL 33572 APOLLO BEACH FL 33572 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/19/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-3396849 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip 8. This corporation owes the current year Intangible Country Personal Property Tax. X Yes □No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CANTERBERRY, DEBRA 82 Street Address (P.O. Box Number is Not Acceptable) 768 KINGSTON COURT **APOLLO BEACH FL 33572** 83 Zip Code 84 City 85 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. ☐ Addition DELETE ☐ Change 1.1 TITLE TITLE CANTERBERRY, DEBRA 1.2 NAME NAME **768 KINGSTON COURT** 1.3 STREET ADDRESS STREET ADDRESS APOLLO BEACH FL 33572 1.4 CiTY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE ΠΠF 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 61 TITLE πLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

14. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Canterberry 4/14/99 (813)645-9177

CR2E034.(11/98)