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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600059742 (2)
COLLIER DIGITAL CORP.

## **FILED** May 09 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 4329 ARNOLD AVE. NAPLES FL 34104 NAPLES FL 34104-3390								
					3. Date Incorporated or Qualified 07/17/1996	3a. Date of Las	st Report	
2. Principal Place of Business 21 1350 - 23 51, 5 w	26	Mailing Address	SI.	Su.	4. FEI Number 65-0683096		Applied For Not Applicable	
Sulte, Apt. #, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 ,	<b>5</b> Additional Required	
City & State	28	City & State Naples,	PL		Election Campaign Financing     Trust Fund Contribution		<b>00</b> May Be led to Fees	
	.5.A _ 29	34117	30]	U.S.A.		Yes X No	er s. 199.032,	
	ess of Current Regist	ered Agent			10. Name and Address of New Re	gistered Agent	···	
AKISON, BARRY D				81 Name				
1380 - 23RD ST. S.W.				82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
NAPLES FL							·	
				83	•			
				84 City		85 2	Zip Code	
11 Paramet to the provisions of Son	viene CO7 OFO2 and CC	7 1609 Florida Stati	ton the a	DOVO named core	poration subroits this statement for the r	FL ° '	og ite registered	
office or registered agent, er both	h, in the State of Florid	a. Such change was	authorize	by the corporali	oration submits this statement for the pion's board of directors. I hereby accept	of the appointment	as registered	
Q / 1 A	cep the obligations of,	Section 607.0505, F	orida Stat			4/30/97		
SIGNATURE Signature, typed printed name	ne of registered agent and tile li	fappt cable (NC	Dayry TE: Register	HKis⊶ Agent signature require	ed when reinstating)	DATE		
	DEFICERS AND DIREC		18.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIREC	TORS IN 12	
TITLE President		DELETE	111	ILE		Chan	ige 🔲 Addition	
NAME BORRY AKIDON			1.2 N	AME				
STREET ADDRESS 1380 23rd 51			1.3 \$	REFT ADDRESS				
CITY-ST-ZIP Naples FL	34117		1.4 0	TY-SI-ZIP				
TITLE VICE - Victine	• •	DELETE	2.1 TI	LTE		☐ Chan	nge [] Addition	
NAME Kirsten Avisa			2.2 N	AME				
STREET ADDRESS 13,80 23, 154	, sw.		2.3 S	IREE1 ADDRESS				
	34117			(1Y - S1 - Z(P				
TITLE		☐ DELETE	3.1 TI			L_J Chan	nge [_] Addition	
NAME			3.2 N	l l				
STREET ADDRESS				REE1 ADDRESS				
CITY-ST-ZIP		DELETE		ITY-S1-ZIP		Chan	non TT Addition	
TITLE		[_] DELETE	4.1 1			Chan	ige [_] Addition	
NAME			4. 2 /					
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIP TITLE		DELFTE	9.4 G 5.1 Ti	TY-SI-ZIP		Chan	ige	
NAME		Eng Deterie	5.1 N	1		L. Silan	g- <u>C</u>	
STREET ADDRESS				IHEET ADDRESS				
l I				TY-S1-7IF				
CITY-ST-ZIP TITLE		DELETE	6.1 T	<del></del>		Chan	nge Addition	
NAME		bitter	62 N			, July 1	e- F-1/100-0011	
STREET ADDRESS			9	IREE1 ADDRESS				
City-st-zip	72-2		6.4 C	TY-ST-ZIP	E- C- 440 07/07/3 Flacilla Class			

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 eath; 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.