

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90079 032 ***150.00

DOCUMENT # **P96000099131 (0)**

1. Corporation Name
SGT. VIDEO, INC.

Principal Place of Business

Mailing Address

**1013 SOUTH HIAWASSEE ROAD, SUITE 3617
ORLANDO FL 32835-1890**

**1013 SOUTH HIAWASSEE ROAD, SUITE 3617
ORLANDO FL 32835-1890**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 **5415 LAKE HOWELL ROAD**

26 **5415 LAKE HOWELL ROAD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **SUITE 172**

27 **SUITE 172**

City & State

City & State

23 **WINTER PARK, FLORIDA**

28 **WINTER PARK, FLORIDA**

Zip

Country

Zip

Country

24 **32792**

25

29 **32792**

30

9. Name and Address of Current Registered Agent

**COMPANY AGENT, INC.
111 SOUTHWEST FIFTH AVENUE
WARNER PLACE - SUITE 200
MIAMI FL 33130-1381**

3. Date Incorporated or Qualified

12/06/1996

4. FEI Number

59-3413511

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PT** ☐ DELETE

NAME **CHEUNG, DAVID W**
STREET ADDRESS **1013 S HIAWASSEE RD 3617**
CITY-ST-ZIP **ORLANDO FL**

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **7655 PERSIAN COURT**
1.4 CITY-ST-ZIP **ORLANDO, FL 32819**

TITLE **VS** ☐ DELETE

NAME **TEITELBAUM, JACK**
STREET ADDRESS **2404 ECON CIRCLE 159**
CITY-ST-ZIP **ORLANDO FL**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS **3900 NORTH HILLS DRIVE, #203**
2.4 CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

DAVID W. CHEUNG, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99
Date

407-352-0037
Daytime Phone # **0099164**

CR20934 (10/97)