

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000102283 (4)

1. Corporation Name

SUPERIOR AUDIO VISUAL OF FLORIDA, INC.

Principal Place of Business

4201 OAK CIRCLE
BOCA RATON FL

Mailing Address

4201 OAK CIRCLE
BOCA RATON FL 33431-4268

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2b. Mailing Address

26 4201 OAK CIRCLE

27 SUITE # 48

28 BOCA RATON, FL

29 33431-4268 30 USA

9. Name and Address of Current Registered Agent

LITTMAN, ERIC P
1428 BRICKELL AVENUE
8TH FLOOR
MIAMI FL 33131

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 the applicable

(NOTE: Location of Agent signature required when relocating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD
PETTIPAS, STEPHEN J

☐ DELETE

NAME

STREET ADDRESS

4201 OAK CIRCLE
BOCA RATON FL

CITY- ST- ZIP

TITLE

VD
MOLINARE, THOMAS

☐ DELETE

NAME

STREET ADDRESS

4201 OAK CIRCLE
BOCA RATON FL

CITY- ST- ZIP

TITLE

SD
MAYER, MICHAEL

☐ DELETE

NAME

STREET ADDRESS

4201 OAK CIRCLE
BOCA RATON FL

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

800002086308
-02/13/97-01007-053
***165.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/97

Signature Photo: # 0006380

FILED
Feb 12 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report
12/19/1996
4. FET Number ☒ 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
10. Name and Address of New Registered Agent

CR2E034 (9/96)