

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

FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000011683 (4)**

1. Corporation Name
HOME VIDEOS FOR LESS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5294 W. RANGER STREET BEVERLY HILLS FL 34465		Mailing Address 5294 W. RANGER STREET BEVERLY HILLS FL 34465	
2. Principal Place of Business 21 7768 W. GULF TO LAKE HWY Suite, Apt. #, etc.		2a. Mailing Address 26 7768 W. GULF TO LAKE HWY Suite, Apt. #, etc.	
22 City & State 23 CRYSTAL RIVER, FL		28 City & State CRYSTAL RIVER, FL	
24 Zip 34429		30 Country USA	
25 Country USA		29 Zip 34429	
27 Country USA		31 Zip 34429	
3. Date Incorporated or Qualified 02/05/1997		4. FEI Number 59-3424342	
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent BERRY, LESLIE D 5294 W. RANGER STREET BEVERLY HILLS FL 34465		10. Name and Address of New Registered Agent	
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable) 7768 W. GULF TO LAKE HIGHWAY			
83			
84 City CRYSTAL RIVER		85 Zip Code FL 34429	

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	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERRY, LESLIE D	1.2 NAME	
STREET ADDRESS	5294 W. RANGER STREET	1.3 STREET ADDRESS	7768 W. GULF TO LAKE HWY
CITY-ST-ZIP	BEVERLY HILLS FL 34465	1.4 CITY-ST-ZIP	CRYSTAL RIVER, FL 34429
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANTOS, MANUEL H	2.2 NAME	
STREET ADDRESS	5294 W. RANGER STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS FL 34465	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

4.13.98 352
327-91012

CR2E034 (10/97)