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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000075059 (0)

PRECIOUS MEMORIES VIDEO PRODUCTIONS, INC.

City & State  Country  Country  Replace of Country  Country  Replace of Country  R		ce of Business	Mailing Address								
3. Date Incorporated or Qualified  08/28/1997  2. Principal Place of Business  2a. Mailing Address  2b. Mailing Address  2c. Certificate of Status Desired  2c. Certificate of St	1329 AUDUB	ION DR.	1328 AUDUBON DR.				DO NOT WRITE IN THIS SPACE				
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. FEI Number							3. Date Incorporated or Qual	fied			
2. Principal Place of Business 2. Mailing Address 3. Suite, Apt. #, etc. 3. Certificate of Status Desired							08/28/1997				
Suite, Apt. **, etc.  22 City & Stafe City & Stafe City & Stafe City & Stafe Country Zip Added to Fees 23 Country 25 29 30 Country 25 29 30 Country 40 Country 25 20 30 Country 25 20 30 Country 25 30 Country 26 Country 27 27 28 29 30 Country 30 Country 30 Country 40 Country 4	_	Place of Business	26				4. FEI Number	1		<del></del>	
City & State Country Countr											
City & State  Country  Zip  Country  Zip  Country  Added to Fees  R. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  Name and Address of New Registered Agent  HEIDE, RUDI E  1328 AUDUBON DR.  COCOA FL 32922  81  City  FL  85  Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.		.#, etc.	<del> </del>	<del></del>			5. Certificate of Status Desire	d $\square$			
25 29 30 Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  HEIDE, RUDI E 1328 AUDUBON DR. COCOA FL 32922  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Vir. 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 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, and accept the obligations of, Section 607 0505, Florida Statutes.	City & Stat	16	City & State	City & State			,	ng 🔲			
9. Name and Address of Current Registered Agent  HEIDE, RUDI E 1328 AUDUBON DR. COCOA FL 32922  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 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, and accept the obligations of, Section 607 0505, Florida Statutes.	<b>—</b>	<u></u>									
1328 AUDUBON DR. COCOA FL 32922  82 Street Address (P.O. Box Number is Not Acceptable)  83											
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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 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.	13	28 AUDUBON DR.					ass (P.O. Box Number is Not Acceptable)				
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.	•	JOON VE GESEE			83						
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 Stato 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.					84	City		F	85	Zip Code	
	office or r	registered agent, or both, in the S	state of Florida, Such change v	was authorized	yd t	the corporation	ration submits this statement for n's board of directors. I hereby	the purpose	of chan	ging its registered ent as registered	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE	SIGNATURE	Simplifies broad or product pages of recognition	of great and title if explicable	(NOTE: Registerer	1 Acres	h signature required	( when reinstating)	DATE			

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition HEIDE, RUDI E 1.2 NAME 1328 AUDUBON DR. STREET ADDRESS 1.3 STREET ADDRESS COCOA FL 32922 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 City-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP Change ☐ DELETE 4.1 TITLE ■ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 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 chapter 60 on an attachment with an address.

SIGNATURE:

REHELDE PLES 4/10/82 407-631-0220

**FILED** 

Apr 27 1998 8:00am

Secretary of State