


FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90210 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P98000049108

1. Corporation Name

AUDIO VIDEO GALLERY, INC.

Principal Place of Business

2921 CORAL WAY
MIAMI FL 33145

Mailing Address

2921 CORAL WAY
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/29/1998

4. FEI Number

65-0863389

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 the current year intangible
 Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 927 Crandon Blvd

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

22 # 14

Suite, Apt. #, etc.

27

City & State

23 Key Biscayne - Dade

City & State

28

Zip

24 33149

Country

25 Dade

Zip

29

Country

30

9. Name and Address of Current Registered Agent

 DEL CORRAL, MAURICIO
 2921 CORAL WAY
 MIAMI FL 33145

10. Name and Address of New Registered Agent

81 Name

Emilio Suarez

82 Street Address (P.O. Box Number is Not Acceptable)

927 Crandon Blvd

14

83

84 City

Key Biscayne

FL

85 Zip Code
33145

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

 TITLE DP ☐ DELETE
 NAME DEL CORRAL, MAURICIO
 STREET ADDRESS 2921 CORAL WAY
 CITY-ST-ZIP MIAMI FL 33145

 TITLE ☐ DELETE
 NAME 
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

 1.1 TITLE PRESIDENT ☐ Change ☒ Addition
 1.2 NAME EMILIO SUAREZ
 1.3 STREET ADDRESS 927 CRANDON BLVD #14
 1.4 CITY-ST-ZIP KEY BISCAIYNE, FL 33149

 2.1 TITLE VICE PRES. SALES ☐ Change ☐ Addition
 2.2 NAME MAURICIO DEL CORRAL
 2.3 STREET ADDRESS 927 CRANDON BLVD #14
 2.4 CITY-ST-ZIP KEY BISCAIYNE, FL 33149

 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

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 of an addressee with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/1/99 (305) 361-1211

CR2E034 (11/98)