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May 03, 1999 8:00 am  
Secretary of State

05-03-1999 90021 002 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000058597

1. Corporation Name  
MIAMI FILM & VIDEO SERVICES CORPORATION

Principal Place of Business: 1170 WEKIVA SPRINGS ROAD, LONGWOOD FL 32779  
Mailing Address: 1170 WEKIVA SPRINGS ROAD, LONGWOOD FL 32779



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
06/29/1998

2. Principal Place of Business: 21 745 Valencia Ave., Suite 2, Coral Gables, FL 33134, USA  
2a. Mailing Address: 26 745 Valencia Ave., Suite 2, Coral Gables, FL 33134, USA

4. FEI 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 owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent  
SCHAEFER, BRIAN D  
1170 WEKIVA SPRINGS ROAD  
LONGWOOD FL 32779

10. Name and Address of New Registered Agent  
81 Name: Eduardo Palmer  
82 Street Address: 8840 NW 196 ST  
83  
84 City: Miami, FL 85 Zip Code: 33018

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: Eduardo Palmer, DATE: 4/05/99

Table with 12 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entry for BARDISA, J. DANILO.

Table with 13 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes entry for Eduardo Palmer.

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, with all other like empowered.

SIGNATURE: [Signature] DATE: 4/27/99 DAYTIME PHONE: 305 829 6689

CR2E034 (1/98)