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

PROFIT CORPORATION ANNUAL REPORT

1999

WEB VIDEO, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

3023 W KENNEDY BLVD

TAMPA FL 33609

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DOCUMENT # P98000067771

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mailing Address

3023 W KENNEDY BLVD **TAMPA FL 33609**

2a. Mailing Address

Suite, Apt. #, etc.

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FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90021 001 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/28/1998

Applied For

\$8.75 Additional

Fee Required

Not Applicable

4. FEI Number

<u>59-35467/</u>

5. Certifcate of Status Desired

City & State	e	City & Sta	ite			6. Election Campaign			May Be
23		28				Trust Fund Contribu	tion	Added	to Fees
Zip	Country	Zip	Zip Cour			8. This corporation owes the current year I			ا
24	25 29 30				Personal Property Tax.				
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LITTLE THOMAS O					Name				.
LITTLE, THOMAS C				82	Street Addr	ess (P.O. Box Number is N	lot Acceptable)		
2123 NE COACHMAN RD, STE A									
CLE	ARWATER FL 33765			83					
				84	City			85 Zip	Code
					Oity		, FL		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, FI	lorida Statutes, t	he above	-named corp	oration submits this statem	ent for the purpose of	changing its	s registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obligation	of Florida. Such ch Bions of, Section 60	iange was autho 07.0505. Florida	Statutes	the corporation	on's board of directors, I he	repy accept the appoin	unen as r	gistereu .
-	m lammar war, and accept me conge		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable	(NOTE: Regi	istered Agen	t signature require	d when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANG	ES TO OFFICERS AN		
TITLE	D		DELETE	1,1 TITLE				☐ Change	☐ Addition
NAME	Wolfe, Larry			1.2 NAME					
STREET ADDRESS	3023 W KENNEDY BLVD			1.3 STREET	ADDRESS				
CITY-ST-ZIP	TAMPA FL 33609			1.4 CITY-S7	r-ZiP	· · · · · · · · · · · · · · · · · · ·			
TITLE			DELETE	2.1 TITLE				☐ Change	Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
CITY-ST-ZIP				2. 4 CITY-S	T-ZIP				
TITLE			DELETE	3.1 TITLE				☐ Change	Addition
NAME			,	32 NAME					İ
STREET ADDRESS				3.3 STREET	ADORESS				
CITY-ST-ZIP				3.4. CITY-S	T-ZIP				
TITLE			DELETE	4.1 TITLE		•		☐ Change	☐ Addition
NAME	•			4, 2 NAME					
STREET ADDRESS			<u> </u>	4 3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE			DELETE	5.1 TITLE				☐ Change	Addition
NAME				5.2 NAME				•	
STREET ADDRESS			1	5.3 STREET	ADDRESS	,			
CITY-ST-ZIP				5.4 CITY-S	T-ZIP				<u></u>
TITLE			DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME				6.2 NAME			,		

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (11/98)