- 2004 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 08, 2004 08:00 AM Secretary of State **DOCUMENT # P98000106191** 1. Entity Name JENNETTE VIDEO, INC. Principal Place of Business Mailing Address 2024 W. FLAGLER STREET 2024 W. FLAGLER STREET MIAMI, FL 33135 US MIAMI, FL 33135 US 09072004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0882852 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROMAY, JORGE DO NOT WRITE 2024 W. FLAGER MIAMI, FL. 33135 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS PΩ TITLE NAME ROMAY, JENNETTE STREET ADDRESS 2024 W. FLAGLER STREET U00000171859 CITY-ST-ZIP MIAMI, FL 33135 09/08/04-80008-019 150.00 TITLE ROMAY, JORGE NAME STREET ADDRESS 2024 W. FLAGLER STREET U00000171859 09/08/04-80008-020 8.75 MIAMI, FL 33135 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this (iting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNING/OFFICER OR DIRECTOR

SIGNATURE:

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