2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000098073 FILED JF3 Video Enterprises 00 HOV -7 AM 10: 51 Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 12317 JW 112 th Miami, F1 33176 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite. Apt. #. etc. Applied For 4. FEI Number City & State City & State Not Applicable Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent F. Snyder 12317 JW 112 th St. Street Address (P.O. Box Number is Not Acceptable) miami, Fl 33176 Zip Code Fl 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. SIGNATURE Signature, typed or printed figure of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible **\$5.00** May Be Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1,1 OFFICERS AND DIRECTORS 11. 12. ☐ Addition L.S. TITLE ☐ Delete Snyder John F 12317 Sw 1174 Street Mari, Fl 33176 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Chaline Addition ☐ Delete Snyder John F. 12317 SW 1124 Strapt NAME NAME STREET ADDRESS STREET ADDRESS miami, F1 39174 CHTY-ST-ZIP CITY-ST-7IP <del>600003465459</del> -11/16/DD-499993-49999 TITLE Delete Snyder Terega 12317 SW 112th Street NAME NAME \*\*\*\*150.00 \*\*\*\*150.00 STREET ADDRESS STREET ADDRESS miami, F1 33176 CITY-ST-ZIP CITY-ST-7IP Addition ☐ Delete TITLE Change TITLE Snyder, Teresa M 12317 SW 112th Street NAMI NAME STREET ADDRESS STREET ADDRESS miami, Fl 33176 CITY-ST-ZIP CITY-ST-2IP Addition ☐ Change Delete THEF NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-2)P Change Delete Addition TITLE THE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 eath, 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

Daytine Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attach ment 1990000980173 2012

Division of Corporations P.O. BOX 6327 Tallahasse, Fl 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of \$150.00 for the annual reports fee with my application.

I also state that I have not received any notice from the Division of Corporations in respect with my corporation JFS VIDEO ENTERPRISES, INC. Thank you for your courtesy in this matter.

JOHN F SNYDER PRESIDENT