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

Mar 03 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT #
1. Corporation Name S06344 (3)CARTER'S VIDEOGRAPHY, INC. Principal Place of Business Mailing Address 3010 NW 159TH STREET 3010 NW 159TH STREET MIAMI FL 33054 MIAMI FL 33054 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/11/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0238054 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** COOK, DONALD F. 3910 NW 167TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33054** 83 84 City 85 Zip Code 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 reinstating) (10/97)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE Change Addition TITLE 1.1 TITLE CARTER, LEO E034 1.2 NAME NAME 3010 NW 159TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition CARTER, EUDELL 2.2 NAME NAME 3010 NW 159TH ST. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition TITLE BONNITA, PALMER 3.2 NAME NAME 17800 N.W. 12TH AVE. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition **CARTER, TRAVIS** NAME 4.2 NAME 3010 NW 159TH ST STREET ADDRESS 4.3 STREET ADDRESS miami fl 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE KNIGHT, HARRIET 5.2 NAME NAME 206 N.W. 2ND COURT STREET ADDRESS **5.3 STREET ADDRESS** MAIMI FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ___ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 on an attachment with an address.

FILED

1/11/10 /2057/ACU