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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # S31894

(6)

UNIVERSITY BOOKS & VIDEOS, INC.

Mailing Address

## **FILED** Jan 27 1997 8:00am Secretary of State



11980 SW 6TH STREET MIAMI FL 33184-1633		11980 SW 8TH STREET Miami FL 33184-1667							
						3. Date Incorporated or Qualified 02/13/1991	3a. Date 06/18		eport .
2. Principal P	lace of Business	2a. Mailing Addres	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26	26			65-0243496		No	ot Applicable
Suite, Apt. 22	#, elc	Suite. Apt. #, e	Suite. Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	e	City & State				Election Campaign Financing     Trust Fund Contribution		\$5,00 Added t	
Ζφ <b>24</b>	25 29 30			Country  8. This corporation has liability for intangible tax under s. 19 Florida Statutes Yes No			. 199.032,		
	9. Name and Address of Cu	rrent Registered Agent		L.,		10. Name and Address of New Re	gistered Age	ınt	
SCH	HINDLER, ROGER J.			81	Name				
SIMON, SCHINDLER & SANDBERG, P.A. 1492 S MIAMI AVE				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33130			83					
				84	City		FL	<b>85</b> Zip (	Code
office or r	to the provisions of Sections 607 egistered agent, or both, in the tim familiar with, and accept the c	State of Florida. Such change	e was authorize	ed by	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of ch t the appoin	anging it tment as	s registered registered
SIGNATURE									
10	Signature, typical or printed name of register	AND DIRECTORS	(NOTE: Register	ed Age	nt signature requi	red when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE EDG AND D	DECTOR	C IN 12
12.	OFFICENS	DELE		IT/ E	<del></del>	ADDITIONS/CHANGES TO OFFIC		Change	Addition
TITLE	WIENER, STEVEN	ויין מנונ	1				1,	Citalige	ואואטאר נייין
NAME	11980 SW 8TH ST			NAME					
STREET ADDRESS	MIAMI FL				ADDRESS				
CHY-ST-ZIP THLE	THE SECTION ASSESSMENT OF THE SECTION ASSESS	☐ DELE		OTY - S	1-211			Change	Addition
NAME			1	NAME			<del></del>	, orango	7,00,000
STREET ADDRESS					ADDRESS				
				CITY-S					
CITY-ST-7IP TITLE		DELE		TITLE	01-ZIF			Change	☐ Addition
NAME				NAME			_		
STREET ADDRESS					ADDRESS				
CITY - ST - ZiP	!			CITY-S	Į.				
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELE		TITLE				Change	Addition
NAME			4 2	NAME				-	
STREET AODRESS					ADDRESS				
CITY-ST-ZIP			1	CITY-S	1				
THILF		☐ DEL		TITLE				Change	Addition
NAME				MAME					
STREET ADDRESS					ADDRESS				
CITY-SI-7IP			5.4 (	CITY - S	T-ZIP				
TITLE		☐ DELI		TITLE			<u> </u>	Change	Addition
NAME			6.23	NAME					
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY-S1-ZIP			64	CITY-S	r-zip				
			A			A STATE OF THE AND ACTIONS FIRST OF THE			44

I do 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.