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

PROFIT CORPORATION ANNUAL REPORT 1999

INDUSTRIAL VIDEO TECHNOLOGIES, INC.

1. Corporation Name

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Jun 07, 1999 8:00 am Secretary of State

06-07-1999 90018 002 ***550.00

a amarakan kisi dikusi kisina arama kisin misin didik dalah didik didik masil didik didik

Principal Place of Business Mailing Address					
2025 TYLER STREET 2025 TYLER STREET					
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 US US					DO NOT WRITE IN THIS SPACE
US		00			3. Date Incorporated or Qualifed
					06/20/1991
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0271869 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired S8.75 Additional Fee Required
City & State	o o	City & State			6. Election Campaign Financing \$5.00 May Be
23	5	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Intangible
24	25	29 3	30		Personal Property Tax. ☐ Yes 🛣 No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
ואים	BERT, JOSEPH		81	Name	TOSEPH D'ALBERT
	N COMMODORE DRIVE 211		82	Street Addre	ess (P.O. Box Number is Not Acceptable)
	NTATION FL 33325		83	1996	NW 125th Terrace
,					
			84		URISE FL 85 Zip Code 333323
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the above	ve-named corno	oration submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was auf	thorized by	v the corporation	on's board of directors. I hereby accept the appointment as registered
SIGNATURE	10C+ DH 1 A1	BENT N	MAR.	hal.	W 6/1/49
SIGNATURE	Signature, typed or printed name of registered agen		Registered Age	ent signature required	
12.	OFFICERS AN		/ 3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD -	☐ DELĒTE	1.1 TITLE		☐ Change ☐ Addition
NAME	DALBERT, RICHARD		12 NAME		
STREET ADDRESS	11831 NW 27TH ST			ET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	☐ DELETE	1.4 CITY-		☐ Change ☐ Addition
TITLE NAMÉ	THE PH D'ACBE	ENT	2.2 NAME		3 • –
STREET ADDRESS	JOSEPH D'ACBE	-13 TERNACE		ET ADDRESS	
CITY-ST-ZIP	SUNRISE AL	3332 3	2. 4 CITY		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	:	
STREET ADDRESS			3.3 STREE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY-	-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	E	
STREET ADDRESS			4.3 STREI	ET ADDRESS	
CITY-ST-ZIP		— Declere	4 4 CITY-		☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		
NAME				ET ADDRESS	
STREET ADDRESS			5.4 CITY-		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	1	_ , _
PTDEET ADDRESS				ET ADDRESS	

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 impowered.