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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S66045

(3)

A TO X VIDEO OUTLETS, INC.

**FILED** Jan 24 1997 8:00am Secretary of State



Principal Place of Business Mailing Address			" A TORRILO IN TITO WILLEN DELIKE DURAN DURAN WILLIAM	ı alalı dizel binil dinil al	ALT BIRGI 1881	
1330 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH FL 33441	1330 SOUTH FEDERAL HIGHW. DEERFIELD BEACH FL 33441-7.					
				3. Date Incorporated or Qualified 07/15/1991	3a, Date of Last 01/23/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	<del> </del>	Applied For
Suite Apl #, etc.	Suite, Apt. #, etc.			65-0270145		Not Applicable
······································	27 Suite, Apr. #, etc.			5. Certificate of Status Desired		Additional Required
City & State	City & State			6. Election Campaign Financing	\$5.0	O May Be
23	28			Trust Fund Contribution		d to Fees
Zip Country		Country		8. This corporation has liability for		s. 199.032,
	29 30	<del></del>		Florida Statutes 10. Name and Address of New Re	Yes No	
g. Name and Address of Current R	egistered Agent	81	Name	10. Name and Address of New Ke	gistered Agent	
LOFCHIE, LISA			Ivanic			
1330 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH FL 33441		82	Street Addre	ess (P.O. Box Number is <b>Not Acceptat</b>	ole)	
DEENFIELD DEACH FL 33441		83				
		84	City		FL 85 2	p Code
11. Pursuant to the provisions of Sections 607,0502 a	nd 607.1508, Florida Statutes, th	he above	-named corpo	oration submits this statement for the p	purpose of changing	its registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligatio	florida. Such change was autho ns of, Section 607,0505, Florida	orized by Statutes	the corporation	on's board of directors. I hereby accep	pt the appointment	as registered
SIGNATURE	,					ŀ
Stgnaturic, typod or printed name of registered agent ar		istered Age	nt signature required	d when reinstating)	DATE	
12. OFFICERS AND D		13.	<del></del>	ADDITIONS/CHANGES TO OFFICE		***************************************
TITLE PD		1.1 TITLE			☐ Chang	e L Addition
NAME LOFCHIE, LISA		1.2 NAME				
STREET ADDRESS 1330 S. FEDERAL HWY.  CITY-ST-ZIP DEERFIELD BEACH FL	ł	1.3 STREET	·			ł
TITLE ST	DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP		Chang	e Addition
NAME LOFCHIE, LISA		2.2 NAME			Cind Cind	7.0011/011
STREET ADDRESS 1330 S. FEDERAL HWY.		2.3 STREET	ADDRECC			
CITY-ST-ZIP DEERFIELD BEACH FL		2. 4 CITY-5		72		
TITLE		3.1 TITLE			☐ Chang	e 🔲 Addition
NAME		3.2 NAME				
STREET ADDRESS	Į.	3.3 STREET	ADDRESS			
CITY - ST - ZIF		3.4. CITY-5	ST-ZIP			
TITLE	DELETE	4.1 TITLE			Chang	e Addition
NAME		4. 2 NAME				
STREET ADDRESS	ŀ	4.3 STREET	ADDRESS			
DifY-S1-Z₽		4.4 CITY - S	T-ZIP	<u> </u>	T   ab	Addition
TITLE		5.1 TITLE			Chang	a L. Addition
NAME		52 NAME				
STREET ADDRESS	1	5 3 STREET	1			
CITY - ST- ZIP TITLE		54 CITY-S 6.1 TITLE	1-ZiP	<u> </u>	Chang	e Addition
NAME		6.2 NAME			cisally	· LI AUGILION
STREEL ADDRESS			ADDRESS			
Citize theories,						

14. 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 schanged, or on an attachment with an address.

SIGNATURE:

LOFCHIE