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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State 🚓 DIVISION OF CORPORATIONS

DOCUMENT #

(8)

VIDICOMP DISTRIBUTORS OF FLORIDA, INC.

6100 BLUE LAGOON DRIVE 100 MIAMI FL 33126 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 07/11/1991  2. Principal Place of Business 2a. Mailing Address 2b										
100 MIAMI FL 33126 US  MIAMI FL 33126 US  MIAMI FL 33126 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/11/1991  2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. City & State Country 2c. Mailing Address 2c. Mailing Ad	Principal Place of Business Mailing Address						PIC 01844 91911 0181	I OISH BIBIL BIBIL INSI		
2. Principal Place of Business 2. Applied For Not Applied For Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Certificate of Status Desired Status Desired Fee Required Fee Required Personal Property Tax due June 30. Suite Added to Fees Added to Fees Personal Property Tax due June 30. Suite Apt. #, etc. 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Suite Apt. #, Name and Address of Current Registered Agent  AIRAN, LALITA D 6100 BLUE LAGOON DRIVE 100 MIAMI FL 33126  81 Name 82 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to line provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, aid adorpt the doligation of Section 607.0505, Florida Statutes.  SIGNATURE Signature required when reinstainip)  DATE	100	100				DO NOT WRITE IN THIS SPACE				
22. Mailing Address 24. Mailing Address 25. Certificate of Status Desired 65-0439357  Suite, Apt. #, etc.  Suite,	US US						3. Date Incorporated or Qualified			
22. Mailing Address 24. Mailing Address 25. Certificate of Status Desired 65-0439357  Suite, Apt. #, etc.  Suite,							07/11/1991			
Suite, Apt. #, etc.  Suite, Ap	2. Principal Place of Busin	ess	2a. Mailing Address				4. FEI Number		Applied For	
27   5. Certificate of Status Desired   Fee Required   City & State   City & City & City & City   City & City & City   City & City & City & City   City &			4 1				65-0439357		Not Applicable	
28 Country Added to Fees  Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  AIRAN, LALITA D 6100 BLUE LAGOON DRIVE 100 MIAMI FL 33126  81 Name 62 Street Address (P.O. Box Number is Not Acceptable)  83 City  FL 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 agent. I am lamiliar with, and address the object to holipayonal of Section 607.0505, Florida Statutes.  SIGNATURE Signature, by Page of printed name by registered agent and life If applicable (NOTE: Registered Agent signature required when reinstating)  DATE	22		<b>—</b>				5. Certificate of Status Desired			
25 29 30 Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  AIRAN, LALITA D  6100 BLUE LAGOON DRIVE 100  MIAMI FL 33126  82 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 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 agent. I am lamiliar pith, and accept the doligation of Section 607.0505, Florida Statutes.  SIGNATURE  Signalized, typed or printed name by registered agent and life if applicable  (NOTE: Registered Agent signature required when reinstating)  DATE	23		<del> </del> 1						•	
AIRAN, LALITA D 6100 BLUE LAGOON DRIVE 100 MIAMI FL 33126  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City  FL 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 lamiliar with, and adcept the doligation of the provision of Sections 607.0505, Florida Statutes.  SIGNATURE Signature typed or printed name by registered agent and little if applicable INOTE: Registered Agent signature required when reinstating)  DATE	24	25	29	<del></del>	untry	,				
6100 BLUE LAGOON DRIVE 100 MIAMI FL 33126  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 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 lamiliar with, and adcept the dioligation of the provision of Sections 607.0505, Florida Statutes.  SIGNATURE  Signature typed or printed name by registered agent and life if applicable  INOTE: Registered Agent signature required when reinstating)  DATE							10. Name and Address of New Registered Agent			
MIAMI FL 33126  83  84 City  FL 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 lamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  Signal (M. typed or printed name by registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE	AIRAN, LALITA D				81	Name			ſ	
84 City  FL 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 lamiliar with, and adoept the doligation of the state of the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and adoept the doligation of the state of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and adoept the doligation of the state of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and adoept the doligation of the state of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and adoept the doligation of the state of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with, and adoept the doligation of the state of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with a provide agent and left it applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					82	Street Addres	street Address (P.O. Box Number is Not Acceptable)			
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 lamiliar with, and agree the doligation of the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and agree the doligation of the corporation's poard of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and agree the doligation of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed of changing its registered agent. I am lamiliar with a proposed its registered agent and left it applicable.  Signature to the corporation of the corporation submits this statement for the purpose of changing its registered agent. I am lamiliar with a proposed its registered agent and left it applicable.  NOTE: Registered Agent signature required when reinstating)  DATE	MIAMI FL 33	126								
office of registered agent, or both in the state of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent. I am lamiliar with, and adcept the doligation of the corporation's board of directors. Thereby accept the appointment as registered agent and interest the corporation's board of directors. Thereby accept the appointment as registered agent and interest the corporation's board of directors. Thereby accept the appointment as registered agent and interest the corporation's board of directors.								FLI	,	
Signal (str. type or printed name by registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE	office of 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 lamiliar with, and adcept the doligation det. Section 607.0505, Florida Statutes.									
12 APRITIONS OF AND DIRECTORS	Signature of printed name by registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
	12.	OFFICERS AND D		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						

\_| DELETE V. P. AIRAN AIRAH, LALITA D NAME 1.2 NAME 6100 BLUE LAGOON DRIVE, #100 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TD TITLE DELETE 2.1 TITLE AGGARWAL, MUKTA NAME 2.2 NAME 232 WEST 38TH STREET STREET ADDRESS 2.3 STREET ADDRESS **HOUSTON TX 77018** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE ☐ Change Addition AGGARWAL, ANIL 3.2 NAME 232 WEST 38TH STREET STREET ADDRESS 3.3 STREET ADDRESS HOUSTON TX CITY - ST - ZIP 3.4. CITY-ST-ZIP ■ DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change NAME STREET 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 officer or director of the corporation or the receiver or trustee empowered to Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

SIGNATURE REQUIRED