

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Moorman  
Secretary of State  
Tallahassee, Florida 32399-0001

APPROVED  
AND  
FILED

95 MAY -1 AM 9:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S78274** (5)

VIDEO GRAPHICS, INC.

Principal Office (if different)      Mailing Address  
**1691A FORUM PLACE**      **1691A FORUM PLACE**  
**WEST PALM BEACH FL 33401**      **WEST PALM BEACH FL 33401**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporation or Qualification <b>09/04/1991</b>	3a. Date of Last Report <b>05/01/1994</b>
4. FEI Number <b>65-0275208</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under 5-109.032, Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Place of Incorporation <b>21</b>	2a. Mailing Address <b>26</b>
3. Date of Report <b>22</b>	3a. State of Report <b>27</b>
4. City & State <b>23</b>	4a. City & State <b>28</b>
5. County <b>24</b>	5a. County <b>29</b>
6. Country <b>30</b>	6a. Country <b>31</b>

**9. Name and Address of Current Registered Agent**  
**SCHUMANN, JULIA ANN**  
**3000 N. OCEAN DRIVE**  
**SUITE 30-B**  
**SINGER ISLAND FL 33404**

**10. Name and Address of New Registered Agent**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. State
85. Zip Code

11. Pursuant to the provisions of Sections 607.0547 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 607.0506, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

1. NAME	<b>PVS</b>
2. NAME	<b>SCHUMANN, JULIA ANN</b>
3. STREET ADDRESS	<b>3000 N. OCEAN DR #30B</b>
4. CITY, STATE, ZIP	<b>SINGER ISLAND FL</b>
5. NAME	
6. NAME	
7. NAME	
8. NAME	
9. NAME	
10. NAME	
11. NAME	
12. NAME	
13. NAME	
14. NAME	
15. NAME	
16. NAME	
17. NAME	
18. NAME	
19. NAME	
20. NAME	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995**

1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. NAME	
8. NAME	
9. NAME	
10. NAME	
11. NAME	
12. NAME	
13. NAME	
14. NAME	
15. NAME	
16. NAME	
17. NAME	
18. NAME	
19. NAME	
20. NAME	

14. I, the undersigned, certify that the information required with this filing is voluntarily furnished and is true and correct, 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 person authorized empowered to execute this report as required by Chapter 607, Florida Statutes, and that my signature is in compliance with the provisions of Chapter 607, Florida Statutes, and that my signature is in compliance with the provisions of Chapter 607, Florida Statutes.

SIGNATURE: *Julia Ann Schumann*, **Julia Ann Schumann**, 4/29/95 (407) 450 1803  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR