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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

FAST FORWARD VIDEO DISTRIBUTORS, INC.						1 10 0 (0) 10 0 () 10 0 () 10 () 1	. 1181 B1811 818 11 8	hidu minis del	Ta) d idi) (88)
Principal Pla	ce of Business	Mailing Address	•			1 40 030 0.0100 1 1000 10440 04401 11010	41 01 010 11 010 11		
22059 US 19 N. P.O. BOX 8107									
CLEARWATER FL 34625 CLEARWATER FL 34618-810				07		DO NOT WO	TE INITIALO O	DACE	
ł					-	DO NOT WRI Date Incorporated or Qualified		PACE	
1					3.	03/04/1992	J		
2. Principal	2. Principal Place of Business 2e. Mailing Address				4.	FEI Number		A	pplied For
21 26						59-3112298		- 	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						Certificate of Status Desired		\$8.75	Additional
22		27						Fee R	equired
City & State City & State					I .	Election Campaign Financing			May Be
Zip	Zip Country Zip		Country		 	Trust Fund Contribution	n ald the answer		to Fees
24	25		30		- 1	This corporation owes or has Personal Property Tax due Ju	· —		No No
	g. Name and Address of Curr		30,			Name and Address of New			
	AN VOORHIS, DAMON		81	Name)				
	2059 US 19 NORTH		82	Street	Address (P.	O. Box Number is Not Accept	able)	-V - F	
C	LEARWATER FL 34625				,				.,
			83						
			84	City				85 Zip	Code
44. 2	1007.07	00 1007 4500 Florid- Division		L	7-1:17-27-2	2 11 1	<u>FL</u>		
office or	t to the provisions of Sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the obli	te of Florida. Such chan ge w as au	s, the above uthorized by	e-named / the cor	a corporation rporation's bi	i submits this statement for the loard of directors. I hereby acc	ept the appo	changing i iniment as	ts registered registered
agent. I	am familiar with, and accept the obli	igations of, Section 607.0505, Flor	ida Statutes	3.					
SIGNATURE	Signature, typed or printed hance of registered a	nuent and title it anglesable (NOTE:	Bonistored Add	ent sionature	re required when	reinstations	DATE		
12.		OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	,	DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 TITLE					Change	Addition
NAME	VAN VOORHIS, DAMON		1.2 NAME						
STREET ADDRESS			1.3 STAEET	ADDRESS					
CITY-ST-ZIP	CLEARWATER FL		14 CITY-S	T-ZIP					
TITLE	STD	L DELETE	21 TITLE		_ر	FAYETTE CIRC MY HARBOR FL		Change	Addition
NAME	FLYNN, SEAN		22 NAME		510	PAYETTE CIKE	ا, ح,	•	
STREET ADDRESS	22059 US 19 NORTH CLEARWATER FL 34625		2.3 STREET ADDRESS 2.4 City-St-Zip		SAUG	MY HARROR EI	246	90.	
CITY-ST-ZIP	CLEANWATER FL 34020	DELETE	31 TITLE			11 71771077 72	., 3-10	Change	Addition
NAME			3.2 NAME				•		
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY - 5						
TITLE		DELETE	4.1 TITLE		<u> </u>		I	Change	Addition
NAME	j.		4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP		4.4 CITY		1 - ZIP			·	_	
TITLE		DELETE	5.1 TITLE				[Change	Addition
NAME			5.2 NAME		ł				
STREET ADDRESS	1								
			5.3 STREET						
CITY-ST-ZIP		Dritte	5.3 STREET 5.4 CITY-S					Change	Addition
TITLE		☐ DELETE	5.3 STREET 5.4 CITY-S 6 1 TITLE				Ī	Change	Addition
		☐ DELETE	5.3 STREET 5.4 CITY-S	1-ZIP			[Change	Addition

14. Thereby 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.

FILED

Feb 18 1998 8:00am

Secretary of State