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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1	996	W. Co	DIVISION OF	CORPORATIO	ONS				
DOCUM 1. Corporation		536	(8)						
	VIDEO INTERNATIONAL	., INC.				A CORP. CALLED AND A SECURIT CALLED		##### ##### ##########################	. <b> </b>
								A summir	
Principal Place of	of Business	Mailing A	ddress						, 4,6,1, 4,6,1, 14,6,7
10120 NW 57TH ST Miami Fl 33178 US		10120 NW 57TH ST MIAMI FL 33178 US							
US		00				3. Date Incorporated or Qualified 04/27/1992	<b>3a.</b> Da	ete of Last Re 10/06/19	
2. Principal Pla	ce of Business	2a. Mailin	g Address			4. FEI Number			Applied For
21	]		26			V VVVVIV			Not Applicable
Suite, Apt. #	, elc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State			State			6. Election Campaign Financing			O May Be
23		28				Trust Fund Contribution		Added	d to Fees
Z(p []]	F-7			Country 30	<del>/</del>	This corporation has liability for intangible tax under s 199.032, Florida Statutes			
4	25 9. Name and Address of Cu	29 rrent Registered .	Agent	1301		10. Name and Address of New		d Agent	
				81	Name				
RICHARD, ROBERTO			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)			
	I.W. 57TH STREET								···
miami f	L 33178			83	ļ <u>.</u>				
				84	City		FI	L  85   Zip	p Code
or registere	o the provisions of Sections 607.0 ed agent, or both, in the State of f n, and accept the obligations of, \$	Florida. Such chang	ge was authoriz	ed by the corp	named corpoi poration's boa	ration submits this statement for the purify of directors. I hereby accept the app	rpose of ci xointment a	hanging its r as registered	egistered office agent. I am
SIGNATURE _	Signative typical or printed hance of registered.	a and and title if made at a	!NC	7 E. Registerud Age	of signature require	d when reinstating)	DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF		ND DIRECTO	PRS IN 12
TITLE	PD		DELETE	1. 1 TITLE				Change	☐ Addition
NAME	RICHARD, ROBERTO			1.2 NAME	[				
STREET ADDRESS CITY-ST-ZIP	10120 NW 57TH ST MIAMI FL			1.4 CITY -	T ADDRESS :				
TITLE	VSD	FT DELETE		2 1 TITLE				☐ Change	Addition
NAME	RICHARD, MARIA L.			2 2 NAME					
STREET ADDRESS	10120 NW 57TH ST				T ADDRESS				
CHY-ST-ZIP T:TLF	MIAMI EL		DELETE	2 4 CITY - : 3 1 THILE				Change	Addition
NAME			<b>_</b>	3.2 NAME					_
STREET ADDRESS				33 STREE	ET ADDRESS				
City-St-ZP			E) belette	3.4 CITY -				Change	Addition
JULE NAME			DELETE	4 1 TITLE 4.2 NAME				Cusufic	- Montroit
NAME STREET ADDRESS					T ADDRESS				
CHY-SI-ZIP				4.4 CITY -					
111.E			DELE 1E	5. 1 THTLE				Change	Addition
NAME				5.2 NAME					
S'HEET ADDRESS					T ADDRESS				
CHY-\$1-ZIF TITLE			DELETE	5.4 CiTY-				☐ Change	☐ Addition
NAME			-	62 NAME					
STREET ADDRESS		\ /		673 STREE	ET ADDRESS				
C-1Y-SI-7P		1./		4 CITY-	ST-ZIP	for the exemption stated in Cast's a 44	0.07(2)(0)	Florida State	toe I further
certify toat oath; that !	, the information indigated on this I am an officer or director of the c	Emplied rooped for bu	ipplegriental and Joeiyer or truste	nual report is tr se en powered	ruo and accur	for the exemption stated in Section 11 ate and that my signature shall have th is report as required by Chapter 607, i	e same leo	าลเคเซอดเลรา	it made linder

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-0894 Date

Daytime Phone #