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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



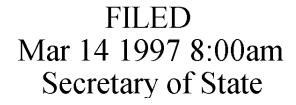
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V62689

(7)

CANDY VIDEO, INC.





Principal Place	of Business	Mailing Address	Mailing Address				BEL BEIDER BEBLIE		
3401 NW 7TH ST MIAMI FL 33125		3401 NW 7TH ST MIAMI FL 33125-4013							
						, , , , , , , , , , , , , , , , , , ,	te of Last Ro 1 <b>3/1996</b>	eport	
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		plied For	
21		26				65-0356025	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	in a			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State		City & State	City & State		O Classica Cincolina		·		
23		l l	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t			
Zip	Country Zip		Country			8. This corporation has liability for intangible			
24	25 29 30		30	Florida Statutes					
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	lgent		
MENENDEZ, RICARDO					81 Name				
	NW 7TH ST		8	82 Street Address		dress (P.O. Box Number is Not Acceptable)			
MIAN	AI FL 33125		Ī	33					
							7	5	
			18	34	City	FL	85 Zip (	2000	
agent. I a	to the provisions of Sections over egistered agent, or both, in line Stat m familiar with, and accept the obli- signature typed or praced reason of registers to	gations of, Section 607.0505, H	orida Statu	tes	i.	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the applicand when resisting?  DAIL	ointment as	registered	
12.	OF LICERS AT	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	DP	DELETE	11111	111111			Change	L Addition	
NAME	MENENDEZ, RICARDO			1.2 NAME					
STREET ADDRESS	3075 NW 7TH ST #102		1.3 STHEET ADDRESS						
CITY-ST-ZIP			2.1 HIII		1- ZIP		Change	Addition	
TITLE NAME	DS Menendez, Candida		2.2 NAN						
STREET ADDRESS	3075 NW 7TH ST #102				ADDRESS				
CITY-ST-ZIP	MIAMI FL				61 - ZIP				
TITLE		DELLE					Change	Addition	
NAME			3.2 NAN	/E					
STREET ADDRESS			3 3 STREET ADDRESS		ADDRESS				
CITY+\$1-ZIP			3.4 CH	Y - S	g - 20°			e <del>ma</del> alasan e	
TITLE	[_] DEVETE		4.1 1111	.[			Change	L  Addit:on	
NAME			4. 2 NA						
STREET ADDRESS			43 STREET ADDRESS						
CITY-ST-ZIP	<del></del>		4.4 C-1 Y + S1 - ZIP 5.1 TITLE		I - ZiP		Change	Add tion	
TITLE NAME			5.2 NAM				energy ride ton		
STREET ADDRESS	s			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CH		į				
TITLE		DELETI 5:					Change	Addition	
NAME			6.2 NAM	6.2 NAMI					
STREET ADDRESS	5		63818	Œ	ADDRESS				
City-St-ZiP			6.4 CH Y+ S1+ ZIP		1-2IP				
14 Ldo berel	by cortify that the information countil	od with this filma does and ana	lify for the	OVO	motion stat	ed in Section 119.07(3)(i). Florida Statutes, Uturthei	r certify that	the	

namely certify mat the information suppried with this ring does not quality for the exemption stated in Section 119.07(3)(i). Horida Statutes, I further certify that the information indicated on this annual report obsupplemental annual apport is true and accurate and that my signature shall have the same logal effect as if made under oath: that I am an officer or director of the corporation (i) the receiver or trustly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cylinges, for on an attachment with an address.