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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 543060**

1. Corporation Name

VINLAND CORPORATION

	• • • • • • • • • • • • • • • • • • • •		_			<b>   </b>		EN 1881
	4 Duninger	Mailing Address						
Principal Place of Business 11600 N.W. 20TH STREET					•			
11600 N.W. 20TH STREET FT. LAUDERDALE FL 33323 FT. LAUDERDALE FL 33323				DO NOT WRITE IN THIS SPACE				
US					3. Date Incorporated or Qualifed			
					08/16/1977	<del>_</del> <del>_</del> <del>_</del>	Applied	l For
		2a. Mailing Address			4. FEI Number	}-		plicable
2. Principal Plac	ce of Business	26			59-1763282	<u> </u>	5 Addit	
21		Suite, Apt. #, etc.			5. Certificate of Status Desired		Requir	
Suite, Apt. #,	etc.	27				\$5	00 May	, Be
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		ed to F	
<u> </u>		28			8. This corporation owes the current year	Intangible		
Zip	Country	Zip	Country		Personal Property Tax.	res	<u>!X</u> (	No
24	25	29 30	<u>'</u>		10. Name and Address of New Register	red Agent		
	9. Name and Address of Current	Registered Agent	81	Name				1
					( D. D Number is Not Acceptable)		<del></del> -	
BOMAN, BERTHO			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	<u> </u>	pen - 4.	
11600	N.W. 20TH STREET		83		一			
FT. L	AUDERDALE FL 33323				हा है है। इंड वैसिट, बहुतेम हुए हैं	85	Zip Coc	lé Propinsi
			84	City		FI I I		
4 . 5 - 5 . 1 . 1 . 5 . 5 . 5 . 5	of Sections 607 050	2 and 607 1508, Florida Statutes	, the above	-named corp	oration submits this statement for the purpos on's board of directors. I hereby accept the a	ppointment	as regis	tered
11. Pursuant	to the provisions of Sections 607.050	of Florida. Such change was auth	norized by la Statutes.	the corporaut	oration submits this statement for the purpos on's board of directors. I hereby accept the a			ſ
US agent. I a	of the provision of the provision of the State of familiar with, and accept the obligation of the provision							
	Signature, typed or printed name of registered age		egistered Agen	t signature require	ad when reinstating) DA ADDITIONS/CHANGES TO OFFICER	S AND DIRI	CTOR	S IN 12
L	Signature, typed or printed name of registered dys-	D DIRECTORS	13.		<del></del>	☐ Ch	ange	Addition
12.	PD	DELETE	1,1 TITLE					
TITLE	BOMAN, BERTHO		1.2 NAME	ĺ				
NAME STREET ADDRESS	11600 N.W. 20TH STREET		1.3 STREE	T ADDRESS				
	FT. LAUDERDALE FL		1.4 CITY-S	T-ZIP		□ Ct	nange	Addition
CITY-ST-ZIP	ST	☐ DELETE	2.1 TITLE		•			
NAME	BOMAN, TERSITA		2.2 NAME		•			
STREET ADDRESS	ALGOD MUNI OCTH CTDEET		•	TADDRESS		·		
CITY-ST-ZIP	FT. LAUDERDALE FL 33323	,	2.4 CiTY-	ST-ZIP		□ c	nange	☐ Addition
TITLE		☐ DELETE	3.1 TITLE	}				•
NAME	ស្តីក្នុង ក្នុងស្រែក ស្រែសសារមាន ១០១ ១១៩៩		3.2 NAME	1			33.46	100
STREET ADDRESS	TOTAL STATE OF THE			ET ADDRESS		<u> </u>		<u>ta ja ja</u>
CITY-ST-ZIP	With the ball of the second	DELETE	3.4. CITY- 4.1 TITLE			, ₁ , □C	hange ;	Addition
TITLE		☐ here is	4.1 IIILE					
NAME,	nia sa or	44 - <del>5</del> - 4	li .	ET ADDRESS	• .			
STREET ADDRES	OH SECTION AND AND AND AND AND AND AND AND AND AN		4.4 CITY-	ŀ			<u></u>	Addition
CITY-ST-ZIP		☐ DELETE	5.1 TITLE			·	Change	☐ WOOKIOI
TITLE ·			5.2 NAMI	I .				
NAME			5.3 STRE	ET ADDRESS	·			
STREET ADDRES	s PO		5.4 CITY	-ST-ZIP			Change	☐ Additio
CITY-ST-ZIP		☐ DELETE	6.1 TITL	- 1	<del></del> -	<b>□</b>	Unanye	_,,,,,,,,,
TITLE		<del></del>	6.2 NAM	E				
· NAME			6.3 STR	EET ADDRESS				
STREET ADDRES	ss		64 CITY	-ST-ZIP		<u>·</u> _		nformation

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**FILED** 

Feb 03, 1999 8:00am

**Secretary of State** 

02-03-1999 90001 047 \*\*\*150.00