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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000065382 (0)

VEGA INTERNATIONAL ENTERPRISES, INC.

FILED Apr 16 1998 8:00am Secretary of State



1416 N.E. 17TH TERRACE FORT LAUDERDALE FL 33304		1416 N.E. 17TH TERRACE FORT LAUDERDALE FL 33304		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/21/1995	
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 65-0605608	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Country 30		Yes VNo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
CR	amer, marie a		81 Name		
1416 N.E. 17TH TERRACE FORT LAUDERDALE FL 33304				dress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registeric		E Registered Agent signature req		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D	☐ DELETE	1.6 THILE		Change Addition
NAME	Cramer, Marie a		1.2 NAME		
STREET ADDRESS	1416 N.E. 17TH TERRACE		1.3 STREET ADDRESS		
City-St-Zip	FT LAUDERDALE FL 3330	4	1.4 CITY-ST-ZIP		
THTLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	·	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME 1			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
I					
STREET ADDRESS			4.3 STREET ADDRESS		l
CITY-ST-ZIP		Druste	4.4 CITY-ST-ZIP		Observa
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby C	ortify that the information supplies	d with this filing does not qualify f	or the exemption stated i	in Section 119.07(3)(i), Florida Statutes. I further ce	ertify 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.

954/566-1299