

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

96 SEP 23 AM 9:17

SECRETARY OF STATE



DOCUMENT # P95000090121 (1)

1. Corporation Name  
 V AND G VENTURES, INC.

Principal Place of Business Mailing Address  
 3900 GALT OCEAN DR SUITE 1717 FT LAUDERDALE FL 33308 3900 GALT OCEAN DR SUITE 1717 FT LAUDERDALE FL 33308

3. Date Incorporated or Qualified 11/28/1995 3a. Date of Last Report  
 4. FEI Number 31-1451076 Applied For Not Applicable  
 5. Certificate of Status Desired \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAPIRO, CAROLA  
 C/O FRATELLI FARMS OF FLORIDA, INC.  
 11400 STATE ROAD 7  
 BOYNTON BEACH FL 33437

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City FL 85 Zip Code

12. 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 registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
 TITLE NAME STREET ADDRESS CITY- ST- ZIP  
 JOHN C VITULLO, Pres 2870 SALT SPINGS ROAD YOUNGSTOWN, OH 44509  
 TITLE NAME STREET ADDRESS CITY- ST- ZIP  
 VICE-PRESIDENT, SEC, TRUSTS GALEN R. HAMILTON 201 HARRISON ST. # 330 SAN FRANCISCO, CA 94105  
 TITLE NAME STREET ADDRESS CITY- ST- ZIP  
 JOSEPH M. VITULLO, V-P 605 CATHY ANN DR. BOARDMAN, OH 44512

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP  
 100001973641--1  
 -10/15/96--01051--002  
 \*\*\*\*225.00 \*\*\*\*225.00  
 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP  
 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP  
 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP  
 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP  
 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John C. Vitullo John C. VITULLO, PRES 8/22/96 330-797-8844  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/96)