FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

FILED
97 MAY -1 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000026536

1. Corporation Name
VIDNA CORPORATION

Principal Place of Business
10836 NW 7th Avenue,
Miami, FL 33168

Mailing Address
10836 NW 7th Avenue
Miami, FL 33168.

3. Date Incorporated or Qualified: 03/26/96
3a. Date of Last Report: N/A

2. Principal Place of Business
21 10836 NW 7th Avenue,
Suite, Apt. #, etc.
22
City & State
23 Miami, Florida
Zip 24 33168 Country 25 USA

2a. Mailing Address
26 10836 NW 7th Avenue,
Suite, Apt. #, etc.
27
City & State
28 Miami, Florida
Zip 29 33168 Country 30 USA

4. FEI Number: 65-0661281 — 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

9. Name and Address of Current Registered Agent
ROSARIO, DAVID
10836 NW 7th Avenue,
Miami, FL 33168

10. Name and Address of New Registered Agent
81 Name
82 Street Address (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: DAVID ROSARIO — Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when resubmitted) — DATE 04/28/97

12. OFFICERS AND DIRECTORS

TITLE	P/D	☐ DELETE
NAME	ROSARIO, DAVID	
STREET ADDRESS	900 NW 207th Street,	
CITY ST ZIP	Miami, FL 33169	
TITLE	S/T/D	☐ DELETE
NAME	ROSARIO, NAOMI	
STREET ADDRESS	900 NW 207th Street,	
CITY ST ZIP	Miami, FL 33169	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME	900002168489--0	
2.3 STREET ADDRESS	-05/06/97--01136--006	
2.4 CITY-ST-ZIP	****173.75 ****173.75	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

JB 5-2-97

14. I do 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.

SIGNATURE: DAVID ROSARIO, President — 08/28/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E022 (9/96)