FILE NOW: FILING FEE AFTER MAY 1ST IS:\$550,00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #*

P97000650720

VICANZA ENTERPRISES, INC.

Principal Place of Business

Mading Address

13813 SW 281 St

FILED Jun 05 1998 8:00am Secretary of State

	**					DO NOT WRITE IN THIS SPACE			
Homestead, FL 33033					3. Date Incorporated or Qualified 6.6.97				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applie	ed For	
21		26				650760285	Not A	pplicable	
Suite. Apt	#. etc	Surte, Apt. #, etc.				S Cartificate of Status Hesitari	.75 Add		
22		27					ee Requi	ired	
City & State	3	City & State					5.00 ма		
23	28						dded to F		
Zip	Country	Z _i ρ	├─── ┐			b. This corporation of the pare the carrent your intengrate			
24	25	29 30			Personal Property Tax due June 30. Yes I No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curr		•	81	Name	IV. Haille and Address of New Hegisteled Agent			
JOSE A. ZAMORA									
13813 5W 281 57.				82	Street Ad	Address (P.O. Box Number is Not Acceptable)			
				83					
146	mestead, 71.	33033		03				ļ	
	,	-5-50		84	City	FI. 85	Zip Cod	te	
44.6		- 06 I COZ 4660 (Cr	l le dia e	11			nine de la		
office or re	lo the provisions of Sections 607 0 egister <u>ed age</u> nt, or both, in the Sta	502 and 607.1508, Florida Stat te of Florida. Such change wa	tutes, the ar s authorized	gove d by	the corpor	orporation submits this statement for the purpose of chan oration's board of directors. I hereby accept the appointment	ging its re ent as regi	istered	
agent. Lar	n familiar with and accept the obl	igations of, Section 607.0505,	Florida Stat	tutes	i.				
SIGNATURE !	430				· • • • • • • • • • • • • • • • • • • •	equired when reinstating) DATE			
12.	Signal Type I or printed name of registered a	ND DIRECTORS	13.	a Age	ra signature req	iguired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS	NI 12	
TITLE		DELETE	1,1 1(11.6		<u> </u>		Addition	
NAME	President	_	1.2 N		Ì			_ , ,	
STREET ADDRESS	Jose A. Zamora		. j		ADDRESS				
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STREET ADDRESS			6357	REET.	ADDRESS	-06/ <u>0</u> 8/380100601 9	/	ר/ט ו	
CITY-SI-ZIP			6 4 CI			*** 1 50 . 00		- (
14. I hereby c						In Section 119.07(3)(i), Florida Statutes. I further certify the	al the info		

region is the and accurate and that my signature sharehave the same regardinent as inmatte driver bath, that my restee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in

SIGNATURE:

407-532-2751