

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 21 PM 2:51

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # L01616 (6)
1. Corporation Name
VINGI CORP.

Principal Place of Business Mailing Address
**% GEORGE R. MORATIS
915 MIDDLE RIVER DRIVE, SUITE 506
FORT LAUDERDALE FL 33304**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
07/11/1989 **06/17/1994**

4. FEI Number Applied For
59-2957744 Not Applicable

5. Certificate of Status Docketed **\$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 26

22 State, Apt. #, etc. 27 State, Apt. #, etc.

23 City & State 28 City & State

24 Zip 25 County 29 Zip 30 Country

9. Name and Address of Current Registered Agent

**MORATIS, GEORGE R.
915 MIDDLE RIVER DRIVE
SUITE 506
FORT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03 **300001465273**

04 City **04/26/95 01857-018**
*****200. FL ***200.00**

Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 DATE

Signature typed or printed (name of registered agent, and title if applicable) (Print: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

11.1 TITLE **DP**

11.2 NAME **VINGERHOETS, TERESA**

11.3 STREET ADDRESS **4900 N. OCEAN BLVD. #810**

11.4 CITY-ST-ZIP **FORT LAUDERDALE FL**

11.1 TITLE **DS**

11.2 NAME **VINGERHOETS, ANA MARIA**

11.3 STREET ADDRESS **4900 N. OCEAN BLVD #810**

11.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

11.1 TITLE **DT**

11.2 NAME **VINGERHOETS, MARIO**

11.3 STREET ADDRESS **4900 N. OCEAN BLVD #810**

11.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

11.1 TITLE **D**

11.2 NAME **HELGEURO, MARIA-ELENA DE**

11.3 STREET ADDRESS **4900 N. OCEAN BLVD #810**

11.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

11.1 TITLE **D**

11.2 NAME **BELLATIN, LUZ MARIA DE**

11.3 STREET ADDRESS **4900 N. OCEAN BLVD #810**

11.4 CITY-ST-ZIP **FT. LAUDERDALE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** Change Addition

1.2 NAME **VINGERHOETS, LEOPOLDO**

1.3 STREET ADDRESS **5100 N. Ocean Blvd. #810**

1.4 CITY-ST-ZIP **Fort Lauderdale, FL**

2.1 TITLE **DS** Change Addition

2.2 NAME **VINGERHOETS, ANA MARIA**

2.3 STREET ADDRESS **5100 N. Ocean Blvd., #810**

2.4 CITY-ST-ZIP **Fort Lauderdale, FL**

3.1 TITLE **DT** Change Addition

3.2 NAME **VINGERHOETS, MARIO**

3.3 STREET ADDRESS **5100 N. Ocean Blvd., #810**

3.4 CITY-ST-ZIP **Fort Lauderdale, FL**

4.1 TITLE **D** Change Addition

4.2 NAME **HELGUERO, MARIA ELENA DE**

4.3 STREET ADDRESS **5100 N. Ocean Blvd., #810**

4.4 CITY-ST-ZIP **Fort Lauderdale, FL**

5.1 TITLE **D** Change Addition

5.2 NAME **BELLATIN, LUZ MARIA DE**

5.3 STREET ADDRESS **5100 N. Ocean Blvd. #810**

5.4 CITY-ST-ZIP **Fort Lauderdale, FL**

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 shown not qualify for the exemptions listed in Sections 111.07(3)(a), Florida Statutes. I further certify that the information included 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 as changed, or on an amendment with an address.

SIGNATURE: SIGNATURE AND TYPED AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leopoldo Vingerhoets **Leopoldo Vingerhoets, President**

Apr 11 10, 1995 (305) 527-5111

SW 4-21-95