

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P93000071273 (5)

1. Corporation Name  
**VECTRIX CORPORATION**



Principal Place of Business: 16489 DEL PALACIO CT. DELRAY BEACH FL 33484  
Mailing Address: 16489 DEL PALACIO CT. DELRAY BEACH FL 33484

3. Date Incorporated or Qualified: 10/08/1993  
3a. Date of Last Report: 03/03/1995  
4. FEI Number: 65-0442120  
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: 21. 6074 GOLF VILLAS DR, 22. BOYNTON BEACH, FL, 23. 33437  
2a. Mailing Address: 26. 6074 GOLF VILLAS DR, 27. BOYNTON BEACH, FL, 28. 33437  
29. 33437

9. Name and Address of Current Registered Agent  
ZEITLER, MARKUS  
16489 DEL PALACIO CT.  
DELRAY BEACH FL 33484

10. Name and Address of New Registered Agent  
81. Name: ZEITLER, MARKUS  
82. Street Address (P.O. Box Number is Not Acceptable): 6074 GOLF VILLAS DRIVE  
83. City: BOYNTON BEACH, FL 85. Zip Code: 33437

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: *Markus Zeitler* MARKUS ZEITLER, SECRETARY DATE: 1-30-96

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	ZEITLER, MARKUS	
STREET ADDRESS	16489 DEL PALACIO CT.	
CITY-ST-ZIP	DELRAY BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add-on
12. NAME	ZEITLER, MARKUS	
13. STREET ADDRESS	6074 GOLF VILLAS DRIVE	
14. CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
21. TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	ZEITLER, MELINDA	
23. STREET ADDRESS	6074 GOLF VILLAS DRIVE	
24. CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
31. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME		
33. STREET ADDRESS		
34. CITY-ST-ZIP		
41. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME		
43. STREET ADDRESS		
44. CITY-ST-ZIP		
51. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME		
53. STREET ADDRESS		
54. CITY-ST-ZIP		
61. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME		
63. STREET ADDRESS		
64. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE: *Markus Zeitler* MARKUS ZEITLER, SECRETARY DATE: 1-30-96 (407) 736-5441

CR2E034 (12/95)