

APPROVED
AND
FILED

1997 JUN 20 PM 3: 39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Moriham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P08525 (8)
1. Corporation Name
VESENAZ (UNITED STATES), INC.

Principal Place of Business	Mailing Address
251 ROYAL PALM WAY, SUITE 602 POST OFFICE BOX 2715 PALM BEACH FL 33480	251 ROYAL PALM WAY, SUITE 602 POST OFFICE BOX 2715 PALM BEACH FL 33480-2715

2. Principal Place of Business		2a. Mailing Address	
21	404 East 79th Street	26	404 East 79th Street
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22	4D	27	4D
City & State		City & State	
23	New York, NY	28	New York, NY
Zip	Country	Zip	Country
24	10021	25	USA
		29	10021
		30	USA

3. Date Incorporated or Qualified 12/24/1985		3a. Date of Last Report 03/12/1996	
4. FEI Number 52-1439762		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									
DE MENDOZA, MARIO G. III 251 ROYAL PALM WAY, SUITE 602 POST OFFICE BOX 2715 PALM BEACH FL 33480	<table border="1"> <tr> <td>81</td> <td>Name</td> </tr> <tr> <td>82</td> <td>Street Address</td> </tr> <tr> <td>83</td> <td>City</td> </tr> <tr> <td>84</td> <td>State</td> </tr> </table>	81	Name	82	Street Address	83	City	84	State
81	Name								
82	Street Address								
83	City								
84	State								

10. Name and Address of New Registered Agent

L. Navon, Esq.
P.O. Box Number is Not Acceptable
Kopelman & O'Donnel
Stirling Road
Auderdale

FL	85	Zip Code 33312
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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, 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

NOT Registered Agent's signature required when reinstalling.

DAI

12.		OFFICERS AND DIRECTORS		13.	
TITLE	PTD	☒ DELETE	1.1 TITLE	PT	
NAME	MARAGON, JOHN F.		1.2 NAME	St	
STREET ADDRESS	251 ROYAL PALM WAY		1.3 STREET ADDRESS	40	
CITY - ST - ZIP	PALM BEACH FL 33480		1.4 CITY - ST - ZIP	Ne	
TITLE	VAS	☒ DELETE	2.1 TITLE	VZ	
NAME	MENDOZA, MARIO G. DE III		2.2 NAME	Ja	
STREET ADDRESS	251 ROYAL PALM WAY		2.3 STREET ADDRESS	40	
CITY - ST - ZIP	PALM BEACH FL 33480		2.4 CITY - ST - ZIP	Ne	
TITLE	SD	☒ DELETE	3.1 TITLE		
NAME	JUNDA, CHRISTOPHER J.		3.2 NAME		
STREET ADDRESS	251 ROYAL PALM WAY		3.3 STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH FL 33480		3.4 CITY - ST - ZIP		
TITLE	AS	☒ DELETE	4.1 TITLE		
NAME	WILKINSON, DEBRA		4.2 NAME		
STREET ADDRESS	251 ROYAL PALM WAY		4.3 STREET ADDRESS		
CITY - ST - ZIP	PALM BEACH FL 33480		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FD ☒ Change ☐ Addition

Stephen M. Pollan

04 East 79th Street, Suite 4D

New York, New York 10021

AS ☒ Change ☐ Addition

ane K. Morrow

04 East 79th Street, Suite 4D

New York, New York 10021

☐ Change ☐ Addition

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7/20/97

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:  Stephen M. Pollan 5/5/97 (212) 737-2717

CR2E034 (9/96)