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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

V J CORP.

FILED Mar 25 1998 8:00am Secretary of State



	e or Business	Malling Addr	ess						
C/O V. J. HA		Ç/O V. J. H							
5491 N.W. 23		5491 N.W. 23							
BOCA RATON	N FL 33496	BOCA RATO	N FL 33496			DO NOT WRITE	N THIS SPACE		7
						3. Date Incorporated or Qualified			
						03/02/1951			
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number	<u> </u>	Applied For	1
21		26				59-1587899		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apl	. #, etc.			5. Certificate of Status Desired		Additional	
22		27				a. Certificate di Status Desired	Fee	Required	1
City & State	е	City & Sta	ite			6. Election Campaign Financing	\$5.0	O May Be	1
23		28				Trust Fund Contribution	Adde	d to Fees	ı
Zip	Country	Z _i p		Cou	ntry	8. This corporation owes or has paid	the current year I	ntangible	1
24	25	29		30		Personal Property Tax due June 3	30. 🔲 Yes	□ Ño	
	g. Name and Address of Cui	rrent Registered Ager	nt			10. Name and Address of New Reg	Istered Agent		1
V	JAY HARVEY				81 Name]
	91 N.W. 23RD AVE.								
	CA RATON FL 33496				82 Street	Address (P.O. Box Number is Not Acceptable	B)		i
00	ON INIONIE 00490				83	Limited 1		,	┨
				1					
				1	84 City	· · · ·	85 Zij	Code	
							FL ° '		
11. Pursuant I	to the provisions of Sections 607 egistered agent, or both, in the Si	0502 and 607.1508, FI tate of Florida, Such cl	orida Statute nange was a	s, the at uthorized	ove-named thy the corr	corporation submits this statement for the pure poration's board of directors. I bereby accept	rpose of changing the appointment a	its registered	
agent. La	m tamiliar with, and accept the ot	bligations of, Section 6	07.0505, Flo	rida Stat	utes.	poration's board of directors. I hereby accept	то арранилот с	io registerea	
SIGNATURE									
	Signature, typed or printed name of registerer		(NOTE	_	l Agent signature	required when reinstating)	DATE		k
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE			Ş
TITLE	PO	Ш	DELETE	1.1 T(1	LE		Change	Addition	ĮΞ
NAME	HARVEY, DAVID			1.2 NA	WE				K
STREET ADDRESS	6324 NW 23 CT			1351	REET ADDRESS				ľ
				1.001	nee i Adonessa				12
CITY-ST-ZIP	BOCA RATON FL				IY-ST-ZIP				IΩ
CITY-ST-ZIP TITLE	BOCA RATON FL SD		DELETE		Y-ST-ZIP		☐ Change	Addition	15
 	BOCA RATON FL		DELETE	1.4 CI	IY-ST-ZIP LE		☐ Change	Addition	E.
TITLE NAME	BOCA RATON FL SD		DELETE	1.4 CII 2.1 TIT 2.2 NA	IY-ST-ZIP Le Me	- 42	☐ Change	Addition	S
TITLE NAME STREET ADDRESS	BOCA RATON FL SD HARVEY, V J		DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST	IY-ST-ZIP LE ME REET ADORESS		☐ Change	: [_ Addition	2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOCA RATON FL SD HARVEY, V J 5491 NW 23RD AVE.		DELETE	1.4 CIT 2.1 TIT 2.2 NA 2.3 ST 2.4 CI	IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP				5
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14. Thereby 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 informatio 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 tystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address

SIGNATURE