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Mar 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 201596

(4)

1. Corporation Name

VEON CORPORATION

Principal Place of Business

5300 LONG ISLAND DRIVE
ATLANTA GA 30328
US

Mailing Address

5300 LONG ISLAND DRIVE
ATLANTA GA 30328
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/15/1957

4. FEI Number

59-0805297

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

CD
SMITH, MARTIN A
1855 PLYMOUTH RD.
ATLANTA GA

TITLE NAME ☒ DELETE

D
SMITH, HELEN B
9801 COLLINS AVE #107
BAL HARBOUR FL

TITLE NAME ☒ DELETE

TV
FINLEY, WALTER
1855 PLYMOUTH RD NW
ATLANTA GA

TITLE NAME ☐ DELETE

SD
SMITH, JUDITH
1855 PLYMOUTH RD NW
ATLANTA GA

TITLE NAME ☐ DELETE

TITLE NAME ☐ DELETE

TITLE NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 5300 Long Island Drive

1.4 CITY-ST-ZIP ATLANTA GA 30327

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME D

2.3 STREET ADDRESS SUSAN S HARRIS

2.4 CITY-ST-ZIP 3187 POWERS FORD

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME MARIETTA, GA 30067

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS 5300 Long Island Drive

4.4 CITY-ST-ZIP ATLANTA GA 30327

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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: *Martin A Smith* MARTIN A. SMITH

03/6/98 404
3-5-6163

CR2E034 (10/97)