FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 01 1997 8:00am

Secretary of State

comption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the curate and that my signature shall have the same legal effect as if made under oath; that cute this report as required by Chapter 607, Florida Statutes; and that my name

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 280267

14. I do hereby certify that the information supplied information indicated on this annual report or stars an officer or director of the corporation appears in Block 12 or Block 13 if change.

SIGNATURE:

(6)

VIGO IMPORTING COMPANY

Puncinal Place	e of Rusiness	Mailing Address							
Principal Place of Business 4701 W. COMANCHE AVENUE		4701 W. COMANCHE AVENUE			,				
TAMPA FL 33614-5431		TAMPA FL 33614-5431	1100		,				
						3. Date Incorporated or Qualified 04/08/1964		ate of Last F 23/1996	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			pplied For	
21		26			59-1050797			lot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27						lequired	
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be				
23 Zip	Country	28	T - Co.	intru		Trust Fund Contribution			to Fees
├ ── ┐		Zip Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	4			r		10. Name and Address of New Registered Agent			
AI FS	SSI, TONY			81	Name				
	WISHART BLVD				Chrost Add	/D O D N N N N N N N N N N N N N N N N N			
	PA FL 33603		82 Street Addre			ess (P.O. Box Number is Not Acceptab	.ej		
				83					
				84	City	······································		85 Zip	Code
riing garan ar an	to the second control of the second control						FL	a	·
office or r agent La	egistered agent, or both, in the State on familiar with, and accept the obligat	and 607 1508, Florida Statu If Florida. Such change was ions of, Section 607.0505, F	authorize Iorida Sta	d by tutes	3-named corp / the corporati 3.	coration submits this statement for the p lion's board of directors. I hereby accep	t the app	ointment a	ns registered 3 registered
SIGNATURE									
Symmetric types to pointed name of regentional agrees and title if applicable. (NOTI 12. OFFICERS AND DIRECTORS				Registered Agent signature require 13.		uirad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD DELETE		1.1 T	TLE		ADDITIONOS INTUES TO OTHE	LITO PAINE	Change	☐ Addition
NAME	ALESSI,TONY		1,2 N						
STREET ADDRESS	4701 W. COMANCHE AVENUE				ADDRESS				
City-St-ZiP	TAMPA FL				ST-ZIP				
TITLE	VO	☐ DELETE	2.11			· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	ALESSI,ROSALIE C		2.2 NAME						
STREET ADDRESS	4701 W. COMANCHE AVENUE		2.3 STREET ADORE		ADDRESS				
CHTY+S1+ZIP	TAMPA FL		2.40	HY-9	\$T-ZIP				
TITLE	SD	DELETE	3.1 1	TLE				Change	Addition
NAME	ALESSI JR,ANTHONY		3.2 N	AME					
STREET ADDRESS	4701 W. COMANCHE AVENUE			3.3 STREET ADDRESS					
CITY - \$1 - ZIP	TAMPA FL		3.4. (HTY-5	ST-ZIP				
TITLE	TD	☐ DELETE	4.1 3	TLE				☐ Change	Addition
NAME	ALESSI, ALFRED		4.21	AME					
STREET ADDRESS	4701 W. CONANCHE AVE.		4.3 S	4.3 STREET ADDRESS					
CITY-ST-ZIP	TAMPA FL		4.4 C	ITY-S	ST-ZIP				
TITLE		☐ DELETE	5.1 ₹	ΞE				☐ Change	☐ Addition
NAME			5.2 N	ΑИΕ					
STREET ADDRESS			5.3 \$	TEET	ADDRESS				
City - St - 7iP			5.4 C	<u></u> s	T - ZI P				
TITLE		☐ DELETE	6.1 T					☐ Change	Addition
NAME:			6.2 N	1E					
STREET ADDRESS			6.3 S	ET	ADDRESS				

not qualify for the report is true and