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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 347564 (7)

VINCENT-PEARSON INC

P	r	in	ci	pal	Pla	ce	of	В	usir	168	S

Mailing Address

## **FILED** Apr 24 1998 8:00am Secretary of State



7480 S.W. 130 MIAMI FL 331		7480 S.W. 136 ST. Miami Fl 33156			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified 06/09/1969				
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For			
21		26			<u>59-12</u> 88649	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired Security Securi				
City & State	)	City & State			6. Election Campaign Financing \$5.00 Me Trust Fund Contribution Added to F				
Zip <b>24</b>	Country 25	7ipi	Countr 30	ý	8. This corporation owes or has paid the current year Intangible Personat Property Tax due June 30. ✓ Yes ☐ No				
	9. Name and Address	of Current Registered Agent			10. Name and Address of New Registers	d Agent			
SH	IELDS, FRED		81	Name					
	30 <b>\$</b> .W. 136 ST. MI FL 33156		82	82 Street Address (P.O. Box Number is Not Acceptable)					
1118	um 1 2 00 100		83						
			84	City	<u> </u>	85 Zip Code			
office or a	e <b>diste</b> red agent or both in	a the State of Florida. Such chance wa	s authorized b	v the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered			
agent. I a	m familiar with, and accep	t the obligations of, Section 607.0505,	Florida Statute	S.					
SIGNATURE	Signature, typed or printed name of	regish ted age of and to enflapplicable (N	IOTE Registered Ag	ent signature requ	prod when reinstaling) DATE	<del></del>			
12.	110	ICERS AND DIBECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12			
TITLE	D	☐ DELETE	1 1 THILE			Change Addition			
NAME	<b>S</b> HIELDS, FRED		1.2 NAME						
STREET ADDRESS	7480 S.W. 136 ST.		1.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 CITY-	ST-ZIP					
TITLE	SD	☐ DELETE	2.1 101LE			Change Addition			
NAME	SHIELDS, LILLIAN		2.2 NAME						
STREET ADDRESS	7480 S.W. 136 ST.			T ADDRESS					
CITY-ST-ZIP	MIAMI FL D	DELETE	2. 4 CITY - 3.1 TITLE	S1-ZIP		Change Addition			
TITLE NAME	SHIELDS, FRED P.	Висп	3.2 NAME						
STREET ADDRESS	13430 SW 78 CT			T ADDRESS					
CITY-ST-ZIP	MIAMI FL		3.4. CITY-						
TITLE	(tell with the	DFLETE	4.1 TITLE	<u> </u>		Change Addition			
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	1 ADDRESS					
CITY-ST-ZIP			4.4 CITY	ST-ZIP					
TITLE		DELETE	5.1 TOLE			Change Addition			
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST - ZIP					
TITLE		☐ DELETE	6.1 THTLE	"		Change Addition			
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	T ADDRESS					
CITY-ST-ZIP			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 changers or on an attachment with an address.