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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 463428 1. Corporation Name

VIES, INC.

NAME

STREET ADDRESS

CITY-ST-ZIP

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90128 004 ***150.00



Principal Place	of Business	Mailing Address	_				
-2709-G.W. ORD- MIAMI FL 2212 6	AVENUE 5815 SW 68 S	T 2700 S.W. ORD AVENUE 581 MIAMI FL 33129	5 SW 68 S	τ			
33 143		33143		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE		
27	179	29147		3. Date Incorporated or Qualifed			
				11/15/1974			
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		Applied For	
21 5019	T SWGB ST	26 BB15 SW	GB ST	<u>59-1561138</u>		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	¥	5 Additional	
22		27		3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	Fee	Required	
City & State		City & State	FL.	6. Election Campaign Financing		00 May Be	
23 MIDM	11 FL	20 (12)	<u> </u>	Trust Fund Contribution		ed to Fees	
بر Zip	Country		Country	8. This corporation owes the current year in	ntangible Yes	□No	
3314	<u> </u>	29 33/43 30	USA	Personal Property Tax.			
	9, Name and Address of Currer	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent		
8440	TINEZ. WALTER B		oi itaine				
NAM OCC	G.W. ORD AVENUE 5815	SUL GR ST	82 Street Ad	ldress (P.O. Box Number is Not Acceptable)			
		200 OC 2.	83				
MAN	11 FL 3 3129		83				
	33143		84 City		85 2	Zip Code	
	<u></u>			prporation submits this statement for the purpose o	_ _		
SIGNATURE	Signature, typed or printed name of registered age		ered Agent signature requ		<u> </u>	TODO 111.40	
12.			13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE ☐ Char		
TITLE	PD	_	.1 TITLE		L Cliar	ige 🔲 Addiso	
NAME	MARTINEZ, WALTER B.		2 NAME				
STREET ADDRESS	2733 S.W. 3RD AVENUE		3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		4 CITY-ST-ZIP		☐ Char	nge Additio	
TITLE	SD	_	.1 TITLE		Cilai	ige 🗀 Additio	
NAME	HOLT, TERRY L.		.2 NAME				
STREET ADDRESS	2733 S.W. 3RD AVENUE		.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		. 4 CITY-ST-ZIP		- Char	nge [] Additio	
TITLE	VD		.17TLE		C Gridi	.a	
NAME	TINNEY, DANIEL D.		2 NAME				
STREET ADDRESS	2733 S.W. 3RD AVENUE		3 STREET ADDRESS	•			
C/TY-ST-Z/P	MIAMI FL		.4. CITY-ST-ZIP	<u> </u>	☐ Char	nge	
TITLE	TD CARLOS	_	2 NAME				
NAME	RUIZ, CARLOS		3 STREET ADDRESS				
STREET ADDRESS	2733 S.W. 3RD AVENUE	· ·	.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	MIAMI FL		.1 TITLE		☐ Char	nge 🔲 Additio	
		_	2 NAME		. 🗕		
NAME STREET ADODESS			3 STREET ADDRESS				
STREET ADORESS			i.4 CITY-ST-ZIP				
CITY-ST-ZIP			A TITLE		☐ Char	nge 🔲 Additio	
NAME		-	2 NAME				

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP