

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

FILED  
Apr 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **634746** (2)  
1. Corporation Name  
**VIC INVESTMENTS, INC.**



Principal Place of Business  
**3000 S.W. 101 COURT  
MIAMI FL 33165**

Mailing Address  
**3000 S.W. 101 COURT  
MIAMI FL 33165**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>9417 NW 54 Doral Circle</b> Suite, Apt. #, etc. <b>Lane</b> 22 City & State 23 <b>Miami FL</b> Zip 24 <b>33178</b>		2a. Mailing Address 26 <b>9417 N.W. 54 Doral Circle</b> Suite, Apt. #, etc. <b>Lane</b> 27 City & State 28 <b>Miami, FL</b> Zip 29 <b>33178</b>		3. Date Incorporated or Qualified <b>09/04/1979</b>	
Country 25 <b>USA</b>		Country 30 <b>USA</b>		4. FET Number <b>59-1960723</b> Applied For Not Applicable	
9. Name and Address of Current Registered Agent <b>FERNANDEZ, VICTOR 3000 S.W. 101 COURT MIAMI FL 33165</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <b>9417 N.W. 54th Doral Circle Lane</b> 83 84 City <b>Miami</b> <b>FL</b> 85 Zip Code <b>33178</b>			
11. Pursuant to the provisions of Sections 607.0102 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.					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable) <b>9417 N.W. 54th Doral Circle Lane</b>	
83	
84 City <b>Miami</b> <b>FL</b>	85 Zip Code <b>33178</b>

11. Pursuant to the provisions of Sections 607.0102 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD FERNANDEZ, VICTOR 3000 S.W. 101 COURT MIAMI FL	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	<b>9417 N.W. 54 Doral Circle Lane</b>
CITY-ST-ZIP		1.4 CITY-ST-ZIP	<b>Miami, FL 33178</b>
TITLE	STD FERNANDEZ, ESPERANZA 3000 S.W. 101 COURT MIAMI FL	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	<b>9417 N.W. 54 Doral Circle Lane</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>Miami, FL 33178</b>
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET 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 changed, or on an attachment with an address.

SIGNATURE:  Victor Fernandez Pres. 4-15-98 (305) 463-8016

CR2E034 (10/97)