FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -8 PM 2:35

DOCUMENT # 684084 (7)

1. Corporation Name
VCH PUBLISHERS, INC.

Principal Place of Business	Mailing Address
303 NW 12TH AVE DEERFIELD BCH FL 33442-8788	303 NW 12TH AVE DEERFIELD BCH FL 33442-8788

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/14/1980
3a. Date of Last Report: 03/23/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2056412 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HRAWG CORP
2000 GLADES RD
STE 400
BOCA RATON FL 33431

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when transacting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1.1 TITLE	☐ Change ☐ Addition
NAME	BROWN, RONALD	1.2 NAME	
STREET ADDRESS	220 E 23RD STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	
TITLE	DC	2.1 TITLE	☐ Change ☐ Addition
NAME	KOEHLER, HANS DIRK	2.2 NAME	
STREET ADDRESS	PAPPELALLEE 3	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEINHEIM GE	2.4 CITY-ST-ZIP	
TITLE	VS	3.1 TITLE	☐ Change ☐ Addition
NAME	SERRATT, OLEN	3.2 NAME	
STREET ADDRESS	303 NW 12TH AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BCH. FL	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	☐ Change ☐ Addition
NAME	CERMAK, FRANK	4.2 NAME	
STREET ADDRESS	220 E 23RD ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	LARSSON, CLAES	5.2 NAME	
STREET ADDRESS	11 OVERLOOK DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	PT. WASHINGTON NY	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Olen Serratt OLEN SERRATT, Vice Pres. 2-27-95 (305)428-5566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Daytime Phone #

C266870 CP