

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED
AND
FILED

1997 AUG 11 AM 10:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000003952 (8)
1. Corporation Name
VIGO REMITTANCE CORP.

Principal Place of Business 33 W. 46TH ST. NEW YORK NY 10036	Mailing Address 33 W. 46TH ST. NEW YORK NY 10036
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

3. Date Incorporated or Qualified 07/28/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 13-3389246	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.
801 NE 167TH ST., #300
NORTH MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PSDC	<input type="checkbox"/> DELETE
NAME	GUSMAO, HELIO	
STREET ADDRESS	33 W. 46TH ST.	
CITY-ST-ZIP	NEW YORK NY 10036	
TITLE	VTDC	<input type="checkbox"/> DELETE
NAME	FREIRE, IVAN	
STREET ADDRESS	1952-702 AVE. EPITICIO PESSOA	
CITY-ST-ZIP	RIO DE JANEIRO BRAZIL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

700002264681-4
-08/12/97-01062-009
***550.00 ***550.00

7/11/97
3/11/97

14. I do 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 _____ SIGNATURE _____

CR2E034 (4/97)

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Headquarters:
33 West 46th Street
New York, NY 10036
Tel: (212) 921-1522
Fax: (212) 768-7762



Remittance Corporation
An International Money Transmitter

212-
827-
0203

07/25/97

Division of Corporation
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find the 1997 Profit Corporation Annual Report. Please note that the fee of \$550 was paid previously (by error check # 33974 was mailed without the report).

I have enclosed a copy of the check mailed on July 21, 1997.

Please contact Renata Chagas at ext. 224 if the check has not been received.

Sincerely,

Dina Geiman
Executive Assistant
Vigo Remittance Corp.

USA
California
Connecticut
Florida
Georgia
Illinois
Maryland
Massachusetts
New Jersey
New York
Rhode Island
South Carolina
Washington D.C.
Wisconsin

CANADA
Alberta
British Columbia
Ontario
Quebec

AUSTRALIA
Brisbane
Canberra
Melbourne
Sidney
Wollongong

8/16/97
waiting for call
sending to my attention