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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500000167 (5)

V.J. ASSOCIATES, INC.

FILED
Jan 14 1997 8:00am
Secretary of State



Principal Plac	e of Business	Mailing Address			(100(100 tile tolet Arit Metri Burt delte Balt Met.) Abtat tiele Bill (Abt fab.				
155 EXECUTIV BOYNTON BE/		155 EXECUTIVE CIRCLE BOYNTON BEACH FL 33436-1835							
						3. Date Incorporated or Qualified 01/11/1995		te of Last F	Report
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Ĭ A	pplied For
21		26				23-2634181		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27				a. Commode of Status Desired	L/	Fee R	equired
City & Stat	е	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip	Coun	try		8. This corporation has liability for i			3. 199.032,
24	25 Name and Address of Curre	29	30			Florida Statutes 10. Name and Address of New Re	Yes [
1176	**	siit negisteled Agetit		31	Name	10. Name and Address of New He	Alaceted 1	-råeur	
	OTTE, JOSEPH		"						
	EXECUTIVE CIRCLE YNTON BEACH FL 33436		E	32	Street Add	dress (P.O. Box Number is Not Acceptab	le)		
	riji pri prantusi i in wwitew		6	33		CHIN MANUAL			
			6	34	City		FL	85 Zip	Code
agent. La	im familiar with, and accept the obli	gations of, Section 607.0505	i, Florida Statut	tes.		ation's board of directors. I hereby acceptions are stating.	DATE	omament as	
12.	OFFICERS A	ND DIRECTORS	13.	_		ADDITIONS/CHANGES TO OFFIC	FRS AND	DIRECTOR	3S IN 12
TITLE	CP	DELETE		<u></u> Е				☐ Change	Addition
NAME	LIZOTTE, JOSEPH		1 2 NAM	1E					
STREET ADDRESS	155 EXECUTIVE CIRCLE		1.3 STRE	EET A	ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 33436		1.4 CITY	-ST	- ZIP				
TITLE	S	DELETE	2.1 TITL	********				Change	Addition
NAME	LIZOTTE, ELLEN	/\	2 2 NAM	1E					
STREET ADDRESS	155 EXECUTIVE CIRCLE		2 3 STRE	EET A	address		9.		
CITY-ST-ZIP	BOYNTON BEACH FL 33436		2 4 CITY	Y-\$1	- ZIP		.,		
TITLE		DELETE	3 1 TITL	Ē				☐ Change	Addition
NAME			3.2 NAM	ŧΞ					
STREET ADDRESS			3 3 STRE	EET A	ADDRESS				
CITY-ST-ZIP			3 4. CITY	Y - ST	r - ZIP				
TITLE		DELETE	4.1 TITL	E				☐ Change	Addition
NAME	`		4. 2 NAN	ИE					
STREET ADDRESS			4.3 STR	EET A	ADDRESS				
CITY - ST - 7IP			4.4 CITY		- ZIP				
TITLE		☐ DELETE	5 1 TITL	E				Change	Addition
NAME			5.2 NAM	1E					
STREET ADDRESS			5.3 STRE	EET A	ADDRESS				
CITY-ST-ZIP			5.4 CITY		- ZIP				
TITLE		☐ DELETE	6.1 TITLE	E				☐ Change	Addition
NAME			6.2 NAM	Æ					
STREET ADDRESS			6.3 STRE	EET A	DDRESS				
CITY-ST-ZIP			6.4 CITY	-ST	- ZIP				
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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: JOS CAA Lize HE

1/4/97 561/237-992

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