PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F95000005742 (0)

VRG INTERNATIONAL, INC.

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address				<u> </u>	- 1 1984(88 (114 1868) 8811 8811 8811 6411 8818 8811 8181 8181	
MERIDIAN CENTER II. 4 INDUSTRIAL WAY WEST MERIDIAN CENTER II. 4 INDUS			INDUSTRIAL	WAY WEST	•	
EATONTOWN NJ 07724 EATONTOWN NJ 07724						
·					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					11/27/1995	
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21		26			22-3004965 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be	
23	28				Trust Fund Contribution	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM				81 Name	· · · · · · · · · · · · · · · · · · ·	
1200 SOUTH PINE ISLAND ROAD				20 25 1	A14 (DO D)	
PLANTATION FL 33324				82 Street Address (P.O. Box Number is Not Acceptable)		
165	TATION I E BOOZT		<u> </u>	B3		
					****750.80 ****758.80 }	
			[7	84 City	85 Zip Code	
					■ 	
11. Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statu	ites, the abo	ve-named o	corporation submits this statement for the purpose of changing its registered	
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						
Olore (Toria)	Signature, typed or printed name of registered agent		NOTE: Registere	d Agent signati	re required when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	✓ DELETE	1.1 TITL	E	CEO 4 TREASURER Change Addition	
NAME	VUKOVICH, ROBERT A		1.2 NAM	E	JOHN R. BRYER	
STREET ADDRESS	ss MERIDIAN CENTER II, 4 INDUSTRIAL WAY WEST 1.3 s			EET ADDRESS	SI CORBETT WAY	
CITY-ST-ZIP	EATONTOWN NJ 07724		14 CIT	-ST-ZIP	EATONTOWN, NJ 07724	
TITLE	DT	DELETE	2.1 TITL		PRESIDENT & SECRETARY Change Addition	
NAME	ROGALIN, PETER M	The percie	2.2 NAM		LOUIS C.WINES	
		DIAL MAY MEST		_	SI CORBETT WAY	
STREET ADDRESS				EETADDRESS		
CITY-ST-ZIP			2.4 CIT		EATONTOWN NJOTTAL	
TITLE	DVS	DELETE	3.1 TITL	E	L_ Change L_ Addition	
NAME }	RASCIO, ANTHONY A		3.2 NAM	E		
STREET ADORESS	MERIDIAN CENTER II, 4 INDUST	RIAL WAY WEST	3.3 STR	EET ADDRESS		
CRY-ST-ZIP	EATONTOWN NJ 07724		3.4 C(T)	/-ST-ZIP		
TITLE		DELETE	4.1 TITL	E	Change Addition	
NAME			4,2 NAN	ΙE		
STREET ADDRESS			4.3.STR	EET ADDRESS	\	
CITY-ST-ZIP			4.4 CIT			
TITLE			5.1 TITL		Change Addition	
		L DELETE			Change Addition	
NAME			5.2 NAN]	
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP	. <u>. </u>		5,4 CIT			
TITLE		DELETE	6.1 TITL	E	Change Addition	
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STR	ET ADDRESS	[15 101/02/66 acm	
CITY-ST-ZIP			6.4 CITY	ST-ZIP	119, 10/25/4K 4XHL 1	
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indicated on this annual report or supplied with unit iting does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. Yourther 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 chapter or an effective 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 chapter or an effective 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 chapter or an effective or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE: