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

PROFIT **CORPORATION** ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600006513 (3)

VIG VANGUARD ELECTRONIC TECHNOLOGIES, INC.

Principal Place of Business Mailing Address P.O. BOX 960445 14421 SW 88 ST., STE. 308 MIAMI FL 33188 MIAMI FL 33296-0445 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0718289 21 Not Applicable Suite. Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Zip Country Zin Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PARRA, MIGUEL A 9400 S.W. 125 PLACE 82 Street Address (P.O. Box Number is Not Acceptable) MIAM# FL 33186 83 Zip Code 84 City 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent's gnature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition 1.1 TITLE TITLE **IGLESIAS, ROBERTO** NAME 1.2 NAME APARTADO 52172 CARACAS 1050 STREET ADDRESS 1.3 STREET ADDRESS **VENEZUELA** CITY-ST-7IP 14 CHTY-ST-ZIP DELETE Change Addition 21 THLE TITLE GARCIA, RAUL NAME 22 NAME AVE. PRINCIPAL LAS ESMERALDAS PISO 10 2.3 STREET ADDRESS STREET ADDRESS CARACAS, VENEZUELA 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-2IP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change \_\_ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 or an attractment with an address. 4-77-94 205-385-5209

6.4 CITY - ST- ZIP