

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000006957 (1)
 1. Corporation Name
VASHNAUTIC GLOBAL INDUSTRIES INC.



Principal Place of Business 3350 6W 3RD AVE. STE. 206B FT. LAUDERDALE FL 33315	Mailing Address 3350 SW 3RD AVE. STE. 206B FT. LAUDERDALE FL 33315
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26	3350 SW 3rd Ave	12/31/1997	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		4. FEI Number	
23. City & State		28. City & State		65-0797988	
24. Zip		29. Zip		5. Certificate of Status Desired <input type="checkbox"/>	
25. Country		30. Country		\$8.75 Additional Fee Required	
		33316		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
		Broward		\$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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

FULLER, DAVID
2217 SE 19TH ST.
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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	D	<input checked="" type="checkbox"/> DELETE
NAME	BUCKINGHAM, DUANE	
STREET ADDRESS	83 HALLS RD.	
CITY-ST-ZIP	OLD LYME CT 06371	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	ORR, EDWIN W III	
STREET ADDRESS	1187-D SOUTH DRIVEWAY	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	FULLER, DAVID	
STREET ADDRESS	2217 SE 19TH ST.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PLATKIN, ROBERT	
STREET ADDRESS	25 DRUMLIN RD.	
CITY-ST-ZIP	WEST SIMSBURY CT 06092	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MULKÉEN-FULLER, SONDRÁ	
STREET ADDRESS	2217 SE 19TH ST.	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MORGAN, STORM	
STREET ADDRESS	7649 EL VERANO	
CITY-ST-ZIP	ELVERTA CA 95626	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Dmaurice Brady	
1.3 STREET ADDRESS	663 Paulson Street	
1.4 CITY-ST-ZIP	AKRON OHIO 44313	
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	S+D	<input checked="" type="checkbox"/> Change <input checked="" 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		

14. I 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 _____ DATE **MAY 11 1998**

CR2E084 (10/97)