

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F98000002426**

1. Corporation Name

**V.J.W. MANAGEMENT, CORP.**

Principal Place of Business

**16057 TAMPA PALMS BLVD., STE. 288  
TAMPA FL 33647**

Mailing Address

**16057 TAMPA PALMS BLVD., STE. 288  
TAMPA FL 33647**

**FILED**  
**Jul 29, 1999 8:00 am**  
**Secretary of State**

07-29-1999 90011 003 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/29/1998**

4. FEI Number

**58-2286504**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**PIZZITOLA, VINCENT A  
16057 TAMPA PALMS BLVD., STE. 288  
TAMPA FL 33647**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **WALTON, CAROLYN**  
STREET ADDRESS **16057 TAMPA PALMS BLVD., STE. 288**  
CITY-ST-ZIP **TAMPA FL 33647**

TITLE **D** ☐ DELETE  
NAME **PIZZITOLA, JANICE**  
STREET ADDRESS **16057 TAMPA PALMS BLVD., STE. 288**  
CITY-ST-ZIP **TAMPA FL 33647**

TITLE **P** ☐ DELETE  
NAME **PIZZITOLA, VINCENT A**  
STREET ADDRESS **16057 TAMPA PALMS BLVD., STE. 288**  
CITY-ST-ZIP **TAMPA FL 33647**

TITLE **ST** ☐ DELETE  
NAME **WALTON, JOHN**  
STREET ADDRESS **16057 TAMPA PALMS BLVD., STE. 288**  
CITY-ST-ZIP **TAMPA FL 33647**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

*Vincent A. Pizzitola*  
**VINCENT A. PIZZITOLA**

**7-23-99**

**813-973-7018**

CR2E034 (5/99)

F98000002426  
598035-90011-3

16057 Tampa Palms Blvd. West,  
Suite 288  
Tampa, FL 33647  
Phone: 813 973-7018 / 977-8396  
Fax: 813 354-2572 / 977-1111

## V. J. W. MANAGEMENT, CORP

July 24, 1999

Division of Corporations  
Annual Reports Filing  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: V.J.W. Management, Corp

Dear Administrator;

Received a second notice for filing of the annual report on July 23, 1999. Never received the first package. I contacted your office and spoke with Debbie. She informed me that the original package and forms sent out were returned and could not determine the reason.

Debbie suggested that I send back the report with the appropriate fee and disregard the late fee being that we never received the first notice.

If you have any questions contact us at (813) 973-7018

Sincerely,



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