

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90030 024 ***150.00

DOCUMENT # G99384

1. Corporation Name

V.G.H. ENTERPRISES, INC.

Principal Place of Business
15180 SW 45 TERR.
MIAMI FL 33185

Mailing Address
15180 SW 45 TERR.
MIAMI FL 33185

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/07/1984

4. FEI Number
59-2393075

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 Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 2501 BRICKELL AVE.

Suite, Apt. #, etc.

22 #906

23 City & State

MIAMI, FL

24 Zip

33129

Country

25 MIAMI-DADS

2a. Mailing Address

26 2501 BRICKELL AVE.

Suite, Apt. #, etc.

27 #906

28 City & State

MIAMI, FL

29 Zip

33129

Country

30 MIAMI-DADS

9. Name and Address of Current Registered Agent

HYZDU, GERALD
15180 SW 45 TERR.
MIAMI FL 33185

Hyzdu
2501 Brickell Ave. #906
Miami, FL 33129

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 607.0503 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent to that of the new address. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and understand the provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, type or print name of registered agent (not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME HYZDU, GERALD
STREET ADDRESS 15180 SW 45 TERR.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VP
NAME HYZDU, VIVIAN
STREET ADDRESS 15180 SW 45 TERR.
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE (GERALD) HYZDU

4/15/99

305-854-472

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (11/98)

0264240