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Apr 23 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J44020 (2)  
1. Corporation Name  
V. D. M. INVESTMENTS, INC.



Principal Place of Business: 1367 HIGHLAND AVE. DUNEDIN FL 34698  
Mailing Address: 1367 HIGHLAND AVE. DUNEDIN FL 34698-4972

3. Date Incorporated or Qualified: 11/25/1986  
3a. Date of Last Report: 05/01/1996  
4. FEI Number: 59-2772188  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 305-B Scarlet Blvd, 22 Oldsmar, FL 34677  
2a. Mailing Address: 26 305-B Scarlet Blvd, 27 Oldsmar, FL 34677  
24 34677, 25 Pinellas, 29 34677, 30 Pinellas

9. Name and Address of Current Registered Agent  
BLOK ARIE  
4703 WRENTHAM PLACE  
PALM BARBOR FL 34685

10. Name and Address of New Registered Agent  
81 Name: Hiram P. Hickman  
82 Street Address: 347 Bailey Court  
83 City: Palm Harbor, FL 34684  
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: *Hiram P. Hickman* HIRAM P. HICKMAN 4/14/97  
NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	BLOK, ARIE	
STREET ADDRESS	4703 WRENTHAM PALCE	
CITY - ST - ZIP	PALM BARBOR FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Hiram P. Hickman	
1.3 STREET ADDRESS	347 Bailey Court	
1.4 CITY - ST - ZIP	Palm Harbor, FL 34684	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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		<input type="checkbox"/> Change <input 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 do 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: *Hiram P. Hickman* HIRAM P. HICKMAN 4/14/97 813/855-4100  
Date: 4/14/97 Daytime Phone: 813/855-4100

CR2E034 (9/96)