

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

FILED
Apr 22 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 # **J63836** (7)
1. Corporation Name
VALUE ADDED INVESTMENTS, INC.



Principal Place of Business 114 CAT CAY LANE INDIAN HARBOUR BCH. FL 32937 US	Mailing Address 114 CAT CAY LANE INDIAN HARBOUR BCH. FL 32937 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/25/1987	
25		30		4. FEI Number 59-2808605	
25		30		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		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 WILSON, CHARLES D 114 CAT CAY LANE INDIAN HARBOUR BCH FL 32937		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	
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIEDER, GREGORY CHARLES	1.2 NAME	
STREET ADDRESS	420 THRUSH DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SATELLITE BEACH FL 32937	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, CHARLES DAVID	2.2 NAME	
STREET ADDRESS	114 CAT CAY LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	INDIAN HARBOUR BCH. FL 32937	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VANSTRUM, MARK	3.2 NAME	
STREET ADDRESS	509 S. PALM AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	INDIALANTIC FL 32903	3.4 CITY-ST-ZIP	
TITLE	DVP <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAWSON, SPANO	4.2 NAME	
STREET ADDRESS	3860 TOBY AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VALKARIA FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, VALERIE	5.2 NAME	
STREET ADDRESS	114 CAT CAY LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	INDIAN HARBOUR BCH. FL 32937	5.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DREISEN, PETER	6.2 NAME	
STREET ADDRESS	4215 WINDOVER WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL 32934	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: *Charles D. Wilson* 4/14/98 407-177-7647

CR2E034 (10/97)