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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

VITTORIO VAC FORM, INC.

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							# 21911 B124 BINI	ii mišis 1881	
2301 8W 581	TH AVE	2301 S.W.	58TH AVENUE						
HOLLY000D FL 33023			OD FL 33023			DO NOT WIDTE IN	THE COACE		
U\$		US	US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
						09/14/1987		1	
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	I IAD	plied For	
21		26	26			65-0007185		t Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				CO 7E		
22		27	27			5. Certificate of Status Desired	Fee Re	quired	
City & State	8	City & S	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip	, · —		У	8. This corporation owes or has paid the current year intangible			
24	25]29		30			Personal Property Tax due June 30. 🗹 Yes 🔲 No 10. Name and Address of New Registered Agent		
D.A	9. Name and Address of Curr	ent Registered Ap	ent	81	Nam		rea Agent		
	Mirez, Frederick J. esq. 44 Pembroke Rd.			L					
	RAMAR FL 33023				Street Address (P.O. Box Number is Not Acceptable)				
1117	WWW WITE COOLS			83	3		.		
				84	l City	,	85 Zip C	Code	
					"		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 Signature, typed or printed name of registered agent and tills if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12	
TITLE	PVS		DEFEAE	1.1 TITLE			Change	Addition	
NAME	VITTORIO, VITO			1.2 NAME				Ì	
STREET ADDRESS	6429 FLAGLER ST.			1.3 STREE	T ADDRES	SS	e, e	Ì	
CITY - ST - ZIP	HOLLYWOOD FL		_	1.4 CITY-	ST-ZIP				
TITLE	TD		DELETE	2.1 TITLE			L Change	☐ Addition	
NAME	VITTORIO, VITO			2.2 NAME				1	
STREET ADDRESS	6429 FLAGLER ST.			2.3 STREE		SS		ļ	
CITY-ST-ZIP	HOLLYWOOD FL		Detete	2. 4 CITY	-ST-ZIP		Ö	Til Addition	
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NAME				3.2 NAME				.]	
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CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	DELETE	3.4. CITY- 4.1 TITLE	-51-ZIP		Change	Addition	
NAME		•		4.2 NAME	:	1			
STREET ADDRESS					Tadores	ss		1	
City-St-ZiP				4.4 CITY -					
TITLE			DELETE	5.1 TITLE	O, E	<u> </u>	Change	Addition	
NAME				5.2 NAME				l	
STREET ADDRESS	:			5.3 STREE	T ADDRES	ss		-	
CITY-ST-ZIP				5.4 CITY -	ST-ZIP				
TITLE		Ì	DELETE	6.1 TITLE			Change	Addition	
NAME				6.2 NAME				į	
STREET ADDRESS				6.3 STREE	T ADDRES	ss		Ī	
CITY-ST-ZIP				6.4 CITY -					
14 I hereby o	pertify that the information supplied	with this filing doe	s not ouglify to	r the even	ntion et	tated in Section 119 07(3)(i) Florida Statutes, Lightly	or cortify that the	Information	

ordicated on this annual report or supplied with this mind does not duality to the exemption stated in Section 118.07(3)(f), indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the sam officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Block 12 or Block 13 if changed, or on an attachment with an address.