

2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # J96470	
1. Entity Name VINET INDUSTRIES, INC.	

Principal Place of Business % ANTONIA DIAZ 3901 W. HALLANDALE BCH. BLVD HOLLYWOOD FL 33023	Mailing Address % ANTONIA DIAZ 3901 W. HALLANDALE BCH. BLVD HOLLYWOOD FL 33023
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2854333 **Applied For** ☐ **Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent DIAZ, ANTONIA 3901 W. HALLANDAL BEACH BLVD HOLLYWOOD FL 33023	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____
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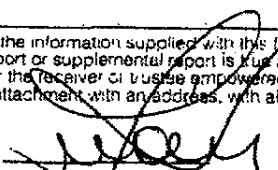
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (Signature, typed or printed name of registered agent and the filer) **NOTE:** Registered Agent signature required when amending **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD DIAZ, JUAN 3901 W. HALLANDALE BEACH BLVD HOLLYWOOD FL 33023 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition UN00000154083 05/04/04-80154-001 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DIAZ, ANTONIA 3901 W. HALLANDALE BEACH BLVD HOLLYWOOD FL 33023 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **JUAN DIAZ - Pres. 4-25-04.**