

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

FILED

Feb 27 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K52164** (6)

1. Corporation Name  
**VICKEN, INC.**



Principal Place of Business <b>C/O WALLACH, KENNETH W. RT-0, BOX 323-D BIG PINE KEY FL 33043 UG</b>	Mailing Address <b>% KENNETH W. WALLACH 42705 TIMBERPINE TRAIL W. PALM BEACH FL 33414-4711</b>
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3. Date Incorporated or Qualified <b>12/12/1988</b>	3a. Date of Last Report <b>02/08/1996</b>
4. FEI Number <b>65-0104256</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>29488 GERALDINE ST.</b>	2a. Mailing Address <b>29488 GERALDINE ST.</b>
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State <b>BIG PINE KEY, FL.</b>	27 City & State <b>BIG PINE KEY, FL.</b>
23 Zip <b>33043</b>	28 Country <b>MONROE</b>
24 Zip <b>33043</b>	25 Country <b>MONROE</b>
29 Zip <b>33043</b>	30 Country <b>MONROE</b>

9. Name and Address of Current Registered Agent <b>WALLACH, KENNETH W. 42705 TIMBERPINE TRAIL W. PALM BEACH FL 33414</b>	10. Name and Address of New Registered Agent 81 Name <b>KENNETH W. WALLACH</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>29488 GERALDINE ST.</b> <del>BIG PINE KEY</del> 83 City <b>BIG PINE KEY, FL.</b> FL 85 Zip Code <b>33043</b>
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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 **Kenneth W. Wallach - KENNETH W. WALLACH, PRES. 2-16-97**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD WALLACH, KENNETH W. <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALLACH, KENNETH W.	1.2 NAME	
STREET ADDRESS	42705 TIMBERPINE TRAIL	1.3 STREET ADDRESS	<b>29488 GERALDINE ST.</b>
CITY - ST - ZIP	W. PALM BEACH FL	1.4 CITY - ST - ZIP	<b>BIG PINE KEY, FL. 33043</b>
TITLE	D WALLACH, VICKI A. <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALLACH, VICKI A.	2.2 NAME	
STREET ADDRESS	42705 TIMBERPINE TRAIL	2.3 STREET ADDRESS	<b>29488 GERALDINE ST.</b>
CITY - ST - ZIP	W. PALM BEACH FL	2.4 CITY - ST - ZIP	<b>BIG PINE KEY, FL. 33043</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: **Kenneth W. Wallach, KENNETH W. WALLACH, 2-16-97** 305-872-4009  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)