

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

**FILED**

**Jan 24 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 # K60832 (8)**  
1. Corporation Name  
**VES REALTY, INC.**



Principal Place of Business Mailing Address  
**% MARGUERITE ARIAS**  
**1201 S.OCEAN DR., SUITE 219 - SOUTH HOLLYWOOD FL 33019**

3. Date Incorporated or Qualified **01/25/1989** 3a. Date of Last Report **02/01/1996**

2. Principal Place of Business 2a. Mailing Address  
21 **1201 So. Ocean Drive** 26 **1201 So. Ocean Drive**  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 **#2006 - South** 27 **#2006 - South**  
City & State City & State  
23 **Hollywood, FL.** 28 **Hollywood, FL.**  
Zip Country Zip Country  
24 **33019 USA** 29 **33019 USA** 30 **USA**

4. FEI Number **65-0095916** Applied For Not Applicable  
5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

**ARIAS, MARGUERITE**  
**1201 S. OCEAN DR., SUITE 219 - SOUTH HOLLYWOOD FL 33019**

81 Name **MARGUERITE ARIAS**  
82 Street Address (P.O. Box Number is Not Acceptable) **1201 So. Ocean Drive**  
83 **#2006 - South**  
84 City **Hollywood** FL 85 Zip Code **33019**

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: **MARGUERITE ARIAS** *Marguerite Arias* **1/17/97**  
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	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	<b>1201 So. Ocean Dr. #2006 - South</b>
CITY - ST - ZIP		1.4 CITY - ST - ZIP	<b>Hollywood, Fla. 33019</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
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: *Marguerite Arias* **1/17/97** (954) 920-9530  
Signature (typed or printed name of signing officer or director) Date Daytime Phone #

CR2E034 (9/96)