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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K99273

1. Corporation Name

| VINTAG | E AIH, INC. | | | | | | | | |
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| | | | | | | | | | |
| Principal Plac | e of Business | Mailing Address | | | | | | I O MEMOL MENDEN MINDEN | 01811 01911 HEB! |
| 7429 NW 50TH | STREET | 7429 NW 50TH STREET | | | | | • | | |
| MIAMI FL 33166 MIAMI FL 33166 | | | | | | İ | | | |
| US US | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | 3. Date Incorporated or | Qualifed | | |
| | | | | | | 06/30/1989 | | | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | | Ι [Δ, | pplied For |
| 21 | : | 26 | | | | 65-0140811 | | <u> </u> | ot Applicable |
| Suite, Apt. | # etc | Suite, Apt. #, etc. | | | | 03 0140011 | | | Additional |
| ⊢ ¬ '' | ,, 0.0 | | | | | 5. Certifcate of Status D | esired Z | - | equired |
| City & Stat | to. | 27 City & State | | | | | | | |
| ⊢ ¬ ' | | ⊢ , ′ | | | | 6. Election Campaign Fi | * | | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | | to Fees |
| Zip | Country | Zip | Countr | У | | 8. This corporation owes | ·- | | <u>. </u> |
| 24 | 25 | 29 | 30 | | | Personal Property Ta: | | ☐ Yes | □No |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address | of New Registere | d Agent | |
| 1474 | | | 81 | 1 1 | lame | | | | |
| | GNER, EDWARD J | | 85 | , , | troot Addres | se /P.O. Boy Number is No | t Accontable) | | |
| 7429 NW 50TH STREET | | | " | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| MIAI | MI FL 33166 | | 83 | 3 | | 1111111111111 | | 2 17 (12.15) | Tall 3021 (14) |
| ŕ | | | | | | <u>- 기계(설)</u> | | 海洋對新 | |
| | | | 84 | | | | The RESERVED FOR SHEET | 85 Zip | Code |
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| THE THE STATE OF | As arrest | | - | 1 | - | | F | | |
| 11. Pursuant | to the provisions of Sections 607.0502 | and 607,1508, Florida Statute | - | 1 | - | ration submits this statemer | t for the purpose of | L of changing its pintment as re | registered |
| 11. Pursuant office or r agent. I a | to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation | and 607,1508, Florida Statute Florida. Such change was arons of, Section 607,0505, Flor | es, the abov | ve-na | - | ration submits this statemer n's board of directors. I here | t for the purpose oby accept the app | bf changing its pintment as re | registered egistered |
| 11. Pursuant office or r agent. I a | to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation | and 607,1508, Florida Statut f Florida. Such change was a ons of, Section 607,0505, Flor | es, the abov | ve-na | - | ration submits this statemer a's board of directors. I here | t for the purpose oby accept the app | cf changing its | registered egistered |
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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 article with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 05, 1999 8:00am

Secretary of State

02-05-1999 90009 009 ***158.75