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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L01616** **(6)**

1. Corporation Name

VINGI CORP.

Principal Place of Business	Mailing Address
% GEORGE R. MORAITIS 915 MIDDLE RIVER DRIVE, SUITE 506 FORT LAUDERDALE FL 33304	% GEORGE R. MORAITIS 915 MIDDLE RIVER DRIVE, SUITE 506 FORT LAUDERDALE FL 33304

3. Date Incorporated or Qualified: **07/11/1989**
3a. Date of Last Report: **04/21/1995**

2. Principal Place of Business
21:
Suite, Apt. #, etc.
22:
City & State
23:
Zip 24: Country 25:

2a. Mailing Address
26:
Suite, Apt. #, etc.
27:
City & State
28:
Zip 29: Country 30:

4. FEI Number: **59-2957744** ☐ 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

MORAITIS, GEORGE R.
915 MIDDLE RIVER DRIVE
SUITE 506
FORT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and date. Both are required.

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP VINGERHOETS, LEOPOLDO ~~5100 N. OCEAN BLVD. #810~~ ~~FORT LAUDERDALE FL~~	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☑ Change ☐ Addition 915 Middle River Dr., #506 Fort Lauderdale, FL 33304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS VINGERHOETS, ANA MARIA ~~5100 N. OCEAN BLVD. #810~~ ~~FT. LAUDERDALE FL~~	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☑ Change ☐ Addition 915 Middle River Drive, Suite 506 Fort Lauderdale, FL 33304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ~~VENGERHOETS~~, MARIO ~~5100 N. OCEAN BLVD. #810~~ ~~FT. LAUDERDALE FL~~	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	DT ☑ Change ☐ Addition Vingerhoets, Mario 915 Middle River Drive, Suite 506 Fort Lauderdale, FL 33304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HELGEURO, MARIA ELENA DE ~~5100 N. OCEAN BLVD #810~~ ~~FT. LAUDERDALE FL~~	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☑ Change ☐ Addition 915 Middle River Drive, Suite 506 Fort Lauderdale, FL 33304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELLATIN, LUZ MARIA DE ~~5100 N. OCEAN BLVD #810~~ ~~FT. LAUDERDALE FL~~	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☑ Change ☐ Addition 915 Middle River Drive, Suite 506 Fort Lauderdale, Fl 33304
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ 6/3/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(954) 563-4163
Daytime Phone #