PROFIT CORPORATION · ANNUAL REPORT.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L14743 1. Corporation Name

VANZ OF FLORIDA, INC.

1999

FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90040 028 ***150.00



Principal Place	of Business	Mailing Address				T ENVISOR ON HALL DINK JEWN DINKA HILL NICHT	Billis didit biati a	
11507 GLENMO		11507 GLENMONT DR						
TAMPA FL 33635		TAMPA FL 33635				DO NOT WRITE IN THIS SPACE		
							S SPACE	 -
			<u> </u>			3. Date Incorporated or Qualifed		
" D. Dain aire at Di	and of Dunings	2a. Mailing Addres				4. FEI Number	An	plied For
— '	ace of Business	2a. Mailing Address	55			59-2970287	<u> </u>	t Applicable
Suite, Apt. i	ff etc	Suite, Apt. #, e	etc.				\$8.75	
22	,, 6.0.	27				5. Certifcate of Status Desired	Fee Re	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	Country	Zip	Co	ountry		8. This corporation owes the current year In		_
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent		 		10. Name and Address of New Registered	d Agent	
LAND	TANIOT IAMEO			18	Name			}
	ZANDT, JAMES			82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)	<u>.</u>	
11507 GLENMONT DR TAMPA FL 33635								
I Alati	FA FL 33033			83				
				84 (City	F:	85 Zip (Code
							- , ,	rogistered
office or re	egistered agent, or both, in the State	e of Florida. Such change	e was authorize	ed by the	amed corpo e corporatio	oration submits this statement for the purpose con's board of directors. I hereby accept the appe	ointment as re	gistered
agent. I ar	m familiar with, and accept the oblig	ations of, Section 607.05	505, Florida Sta	atutes.				
SIGNATURE			(NOTE: Posistore	ad Amont of	ageture regulated	d when reinstating) DATE		\
-	Signature, typed or printed name of registered ag	ent and title if applicable.		ou Agent Si	Susrnie redmied			
	OFFICERS A	ND DIRECTORS					ND DIRECTO	RS IN 12 "
12.		ND DIRECTORS		TITLE		"ADDITIONS/CHANGES TO OFFICERS"	AND DIRECTO	PRS IN*12 To Addition
TITLE	Р	IND DIRECTORS	LETE 1.17		= ====================================			
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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 changes or on an attachment with an address, with all other like empowered.

SIGNATURE: