

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

97-98 APPROVED AND FILED

98 JAN 26 AM 11:39

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



SECRET CORPORATION ANNUAL REPORT 1997 AND 1998

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

DOCUMENT # L16964 (3)
 1. Corporation Name VANY CORPORATION
REINSTATEMENT 97-98

Principal Place of Business: 3211 PONCE DE LEON BLVD. STE. 201 CORAL GABLES FL 33134
 Mailing Address: 3211 PONCE DE LEON BLVD. STE. 201 CORAL GABLES FL 33134

2. Principal Place of Business (21-24)
 2a. Mailing Address (25-28)
 22. Suite, Apt. #, etc.
 23. City & State
 24. Zip Country
 25. Country
 26. Suite, Apt. #, etc.
 27. City & State
 28. Zip Country
 29. Country 30.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/19/1989
 3a. Date of Last Report: 05/09/1996

4. FEI Number: 65-0157672
 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
 GULISANO, GEORGE
 3211 PONCE DE LEON BLVD.
 STE. 201
 CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
 81 Name: ERNESTO R. GRECO
 82 Street Address (P.O. Box Number is Not Acceptable):
 83: 7400 S.W. 107 AVE.
 84 City: miami FL 85 Zip Code: 33193

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: *[Signature]* ERNESTO R. GRECO, V.P.
 (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	GRECO, RODOLFO	
STREET ADDRESS	3211 PONCE DE LEON BLVD., STE. 201	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	GRECO, ERNESTO	
STREET ADDRESS	3211 PONCE DE LEON BLVD, STE. 201	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	GRECO, NORBERTO	
STREET ADDRESS	3211 PONCE DE LEON BLV., STE. 201	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	600002415238	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	-01/28/98--01105--018	
1.3 STREET ADDRESS	*****900.00	*****900.00
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

[Signature] Jan 26, 1998

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: *[Signature]* ERNESTO GRECO (305) 873 8796

CR2E034 (4/97)