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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mertham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # L20664

(3)

VING FLORIDA, INC.

FILED Jun 19 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 3110 BLEMAR ST 3110 BLEMAR ST FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304-4							
				 Date Incorporated or Qualified 10/03/1989 	3a. Date of L 04/22/19	•	
├ ── - / - * •		2a. Mailing Address	Com 5	4. FEI Number	L	Applied For	
21	#	26 C/o Ivan A	Suite 507	' · ^A · 65-0147809		Not Applicable	
		27 601 Bricke:	27 601 Brickell Key Dr.			Fee Required	
City & State		City & State				\$5.00 May Be Added to Fees	
Zip Country		28 Miami, Florida 33131		Trust Fund Contribution	for intangible tax under s. 199,032.		
24	25	<u> </u>	50	or this corporation has madily to	Yes XENO	ider s. 199.032,	
=	9. Name and Address of Curre			10. Name and Address of New F			
311	MMELHOFF, MONICA 0 BELMAR ST LAUDERDALE FL 33304		82 Street Ad 83 60 84 City	OMEZ, IVAN A., PA Idiess (P.O. Box Number is Not Accept D1_BRICKELL_KEY_DR wite_507 IAMI		Zip Code 33131	
office or r agent. I a SIGNATURE	Signature, typed Aird into name of registered as	02 and 607.1508, Florida Statutes c of Florida. Such change was au pations of, Section 607.0505, Flori of that the ill application (NOTE)	is, the above-named control thorized by the corpordal da Statutes. Tvan A Registored Agent signisture rec	orporation submits this statement for the ration's board of directors. I hereby acc Comez, Presiden ADDITIONS/CHANGES TO OFF	t 4/16/9	77. —	
TITLE	D	DELETE	1.1 TITLE		Ix Ch.		
NAME	WEIHAGEN, SAM		1.2 NAME	President			
STREET ADDRESS	3110 BLEMAR ST		1.3 STREET ADDRESS	401 N.Atlantic Boule	vard		
CITY - ST - ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP	Fort Lauderdale, FL			
TITLE	P	DELETE	2 1 11TLE	Secretary	∐ Ch	ange 🔼 Addition	
NAME	RUMMELHOFF, MONICA		2.2 NAME	Simon March			
STREET ADDRESS	3110 BELMAR ST		2.3 STREET ADDRESS	401 N.Atlantic Boule			
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL ST	DELETE	2.4 CITY - ST - ZIP 3.1 TITLE	Ft.Lauderdale Fl. 3330	04X Chi	ange Addition	
NAME	LANKLEY, PETER		3.2 NAME	Treasurer		-	
STREET ADDRESS	3110 BELMAR ST		3.3 STREET ADDRESS	LANGLEY, PETER (Corr 401 N.ATlantic Blvd	ect spelli	ng)	
CITY-ST-ZIP	FT. LAUDERDALE FL		34. CITY-ST-ZIP	Fort Laulerdale, FL	33304		
TITLE		DELETE	4.1 TITLE		☐ Chi	ange Addition	
NAME			4. 2 NAME			'	
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4.4 CITY - ST - ZIP		<u></u>		
TITLE		DELETE	5.1 TITLE		☐ Cha	ange	
NAME			5.2 NAME				
STREET ADDRESS			53 STREFT ADDRESS			ľ	
CITY-ST-ZIP		T DELEVE	5.4 C(TY-S1-Z(P		——————————————————————————————————————	A Laborator	
TITLE		☐ DELETE	6.1 TITLE		Cha	ange 🔲 Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP	by cartify that the information symplicity	ad with this filion door not qualify	6.4 CITY - ST - ZIP	od in Section 119 07/3/(i) Florida Statu	ton Liuther cortif	that the	

order Supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the nor in the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name god, or on an attachment with an address.