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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L23807 1. Corporation Name

VSN ENGINEERING, INC.

Suite, Apt. #, etc.

Principal Place of Business Mailing Address

8550 W FLAGLER ST 8550 W FLAGLER ST STE 113

MAIM! FL 33144

US US

2. Principal Place of Business 2a. Mailing Address

26

27

Suite, Apt. #, etc.

FILED Feb 06, 1999 8:00am Secretary of State

02-06-1999 90024 022 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

10/17/1989 4. FEI Number

65-0162556

| City & Stat | le | City & State | | | 6. Election Campaign Financin | | · \$5.00 i | May Be |
|----------------------|---|---------------------------------------|----------------------------|---------------------|---|----------------|-----------------|-------------------|
| 3 | 28 | | | , | Trust Fund Contribution | Added to Fees | | |
| Zip | Country Zip | | Country | | 8. This corporation owes the co | ırrent year Ir | | |
| 4 | 25 | 29 | 30 | | Personal Property Tax. | | | □No |
| | 9. Name and Address of Curre | ent Registered Agent | | | 10. Name and Address of Nev | / Registered | l Agent | |
| | | | | Name | | | ** | • |
| SOSA, JORGE L | | | 82 | Street Add | ress (P.O. Box Number is Not Acce | ntable) | | |
| 4410 ALTON ROAD | | | 62 | Silect Audi | ress (F.O. Box Harriochis Hat Flose | o a series | | gio asseri esta |
| MIAMI BEACH FL 33140 | | | | 83 | | | | |
| | | * | | | | \$ 1.6 to | 1964 - 34 Pen - | 1 1 1 3 1 1 1 1 |
| | | | · 84 | City | • | FI | 85 Zip C | ode |
| All Principles | to the provisions of Sections 607.05 | 02 and 607 1508. Florida Statu | tes the above | named com | poration submits this statement for the | ne ouroose o | f changing its | registered |
| or i office or i | registered agent for both, in the State | e of Florida. Such change was a | authorized by 1 | the corporate | on's board of directors. I hereby acc | ept the appo | ointment as reg | istered |
| ##⊪agent. I a | m familiar with, and accept the oblig | jations of, Section 607.0505, Fi | orida Statutes. | | | | | |
| SIGNATURE | | | | | | D.175 | | |
| | Signature, typed or printed name of registered ag | · · · · · · · · · · · · · · · · · · · | | t signature require | ADDITIONS/CHANGES TO C | DATE | NO DIRECTO | RS IN 12 |
| 12. | | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO C | JI FIGERS A | Change | Additio |
| TITLE | D | ☐ DELETE | 1.1 TITLE | | | | | |
| NAME | SERRATE, LEANDRO M | | 1.2 NAME | | | | | |
| STREET ADDRESS | 3621 SW 132 PL | • | 1.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY-ST | -ZIP | | | <u> </u> | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | • • | | Change | Addition Addition |
| NAME | VARGAS-FOURNIER, ABBEY | | 2.2 NAME | | | | | |
| STREET ADDRESS | 41104001 4155445 | | 2.3 STREET | ADDRESS | | , | , | |
| CITY-ST-ZIP | CORAL GABLES FL | | 2. 4 CITY-S | T-ZIP | • | | 100 | |
| TITLE | D. | ☐ DELETE | 3.1 TITLE | | | | Change | Addition |
| NAME | VARGAS-FOURNIER, RODOLI | , – | 3.2 NAME | | | • | | |
| 1 1 4 1 1 | | , o | 3.3 STREET | ADDDESS | | | Notes a garage | |
| STREET ADDRESS | (1) おりませい (1) をいっています。 | | | | | | | |
| CITY-ST-ZIP | CORAL GABLES FL | . DELETE | 3.4. C/TY-\$* 4.1 T/TLE | 1-219 | * | | Change | Additio |
| TITLE | D | □ occeie | ł | | | | - 13 cimigo : | |
| NAME | SERRATE, LEANDRO J | · · · · · · · · · | 4, 2 NAME | | | | | |
| STREET ADDRESS | | ; · * | 4.3 STREET | 1 | | | | |
| CITY-ST-ZIP | MIAMI FL | | 4.4 CITY-ST | -ZIP | | | | |
| TITLE | | . DELETE | 5.1 TITLE | | | • | ☐ Change | Addition |
| NAME . | 1 | | 5.2 NAME | | · · | | • | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | \$ 2 | | 5.4 CITY-ST | r-ZIP | ş | | | |
| TITLE | SECTION OF HE SECTION SECTION | ☐ DELETE | 6.1 TITLE | | | | ☐ Change | Addition |
| NAME | MAN PLANT | • | 6.2 NAME | | | | | |
| · · · · - | 1 1. 25 6 5 | | 6.3 STREET | ADDRESS | • | | | |
| STREET AIVIDESS | g and the first | | 0.0 O I / ILLE I | , 2011200 | | | | |
| STREET ADDRESS | | | 6.4 CITY-ST | | | | | |

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 informatior 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 of material 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEFRATE (VI

Daytime Phon