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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(3)

VELVE	NTOS, INC.			
Principal Plac	e of Business	Mading Address		
			urc	
2632 VELVENTOS DRIVE CLEARWATER FL 34621		2632 VELVENTOS DRIVE CLEARWATER FL 34621		
US		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				05/17/1990
_ `	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 Cuito And	* 010	26		59-3009415 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State	n	City & State		Fee Required
23	•	<u> </u>		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28	Country	
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	g, Name and Address of Curre			10. Name and Address of New Registered Agent
PAPPAS, GEORGE E 81 Name				
0000 VELVENTOC DONE				
SUITE E			82 Street A	Address (P.O. Box Number is Not Acceptable)
	EARWATER FL 34621		83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-name office or registered agont, or both, in the State of Florida, Such change was authorized by the control of the contro				corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblic	e of Florida, Such change was	s authorized by the corp	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	the day and addopt the comp	(district of, occord 1 001.0003, 1	Tionoa biatutes.	
SIGNATURE	Signature, typed or printed name of registered ag	jont and title it applicable (NC	OTE: Registered Agent signature	required when reinstaling) DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PAPPAS, GEORGE E.		12 NAME	
STREET ADDRESS	2632 VELVENTOS DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		1.4 CiTY-ST-ZiP	
TITLE	D	☐ DELFTE	2.1 TITLE	☐ Change ☐ Addition
NAME	KANTZIOS, JIM		2.2 NAME	
STREET ADDRESS	2626 VELVENTOS DRIVE		2.3 STREET ADDRESS	d e e e e
CITY-ST-ZIP	CLEARWATER FL		2. 4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		, , , , , , , , , , , , , , , , , , ,	5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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 supplieriental 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 altachment with any didress

FILED

Mar 30 1998 8:00am

Secretary of State