FILED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 Jun 18 1997 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Socretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # M63260 (7) VINYL CORP. Principal Place of Business Mailing Address 8255 N.W. 70TH ST. 8255 N.W. 70TH ST. MIAMI FL 33166 MIAM! FL 33166-2743 3. Date incorporated or Qualified 3a. Date of Last Report 12/04/1987 03/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-0020683 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo 23 Trust Fund Contribution Added to Fees 28 Ζιρ Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Florida Statutes Yes No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ARTILES, RUBEN 8130 N.W. 74TH ST. Street Address (P.O. Box Number is Not Acceptable) MEDLEY FL 33166 83 84 City 85 Zip Code 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, it am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent's greature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE Change Addition TITLE 1.1 **1**0 U NAME REYES, ERENIO 1.2 NAM6 8255 N.W. 70 STREET STREET ADORESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 CITY - ST - ZiP DELETE Change Addition TITLE 21 MILE NAME **ARTILES, RUBEN** 2.2 NAME 8130 N.W. 74 STREET STREET ADDRESS 2.3 STREET ADDRESS MEOLEY FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE THE Change Addition 3.1 DRUE BIFANO, GABRIEL NAME 3.2 NAME **8255 NW 70 STREET** STREET ADORESS 3 3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 Till E NAME 4. 2 NAME STREET ADORESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELFTE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition

14. I do hereby certify that the information supplied with this filing doos 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 eath; that I am an officer or director of the countralism 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. 305 4116464 War 191

6.1 TrULE

6.2 NAME

63 STREET ADDRESS

TITLE

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP