NO	FILE NOW: F	ILING FEE IS \$			FIL May 06 10	
CORPORATION ANNUAL REPORT 1998			Sandra B. Mortham		May 06 1998 8:00an	
		Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
Corporation		537 (:	(3)			
VANKAF	RA TECHNICAL INSTITU	ITE, INC.				
Principal Place of Business Mailing Address						
Incipal Place		-	ailing Address 31 ALEXANDRIA DR.			
A LOCKA FL		OPA LOCKA FL 3			 Date Incorporated or Qualified 03/18/1991 	
					4. FEI Number 65-0383366	Applied For Not Applicable
Principal Pl	lace of Business	29. Mailing Add	lress		6. Certificate of Status Desired	\$8.75 Additional
Suite, Apt. (#, etc.	26 Suite, Apt. #	, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be
City & State	8	27 City & State			Trust Fund Contribution 7. Is this nonprofit corporation a hore	Added to Fees
Zip	Country	28 Zip		Country	P-	16s 🗌 No
	25	29	30		 This corporation owes or has paid Personal Property Tax due June 30 	0. 🖸 Yes 🎽 📜
	9. Name and Address of C	urrent Registered Agent		81 Name	10. Name and Address of New Regis	stered Agent
SMITH, W	VILLIELYRA			82 Street Add	dress (P.O. Box Number is Not Acceptable)
2131 NW	96 ST.			82 Street Add	dress (P.O. Box Number is Not Acceptable)
2131 NW MAMI FL	96 ST. 33147	20502 and 617, 1508, Flori	ida Statutes, th	83 84 City	rooration submits this statement for the our	FL 85 Zip Code
2131 NW MAMI FL Pursuant to office or re agent. I an SNATURE	96 ST. 33147	State of Florida. Such char obligations of, Section 617.	nge was autho .0503, Florida	83 84 City	rporation submits this statement for the pur ation's board of directors. I hereby accept t	FL 85 Zip Code
2131 NW MIAMI FL office or re agent. I an GNATURE	96 ST. 33147 to the provisions of Sections 617 egistered agent, or both, in the s m familiar with, and accept the of Signature, typed or priviled name of register OFFICERS	State of Florida, Such char obligations of, Section 617 ed agent and title if applicable S AND DIRECTORS	nge was autho .0503, Florida (NOTE: Regi	83 64 City ne above-named con- rized by the corpore Statules. isterad Agent signalure req. 13.	rporation submits this statement for the pur ation's board of directors. I hereby accept t	FL B5 Zip Code pose of changing its registered the appointment as registered DATE RS AND DIRECTORS IN 12
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