2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jun 06, 2005 8:00 am Secretary of State

DOCUMENT # P03000048 1. Entity Name VENGRAM, INC.		06-06-2005	90002 044 ***150.0	Ю	
Principal Place of Business 3121 NW 47TH TERRACE, BLDG. 4-301 LAUDERDALE LAKES, FL 33319 US	Mailing Address 3121 NW 47TH TERRA LAUDERDALE LAKES, F				
2. Principal Place of Business 30 TH TERL 3. Mailing Address 3910 N.W. 30		BATHTERN			
Suite, Apt. #, etc.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	05092005 Chg-P	CR2E034 (10/03)	
LAN GER date LAKES LAN GERDALE		- LAKES FIR	4. FEI Number 51-0464367		plied For Applicable
33309 Browned	33305	USA Brown	7	S8.75 Addi Fee Required	
6. Name and Address of Current	Name	7. Name and Address of New Registered Agent			
LOWERY, VEDA 3121 NW 47TH TERRACE, BLDG. 4-30 LAUDERDALE LAKES, FL 33319	Street Address	Street Address (P.O. Box Number is Not Acceptable)			
1 4		LAUde	erdale LAK	(85	•
Address has change		City		FL 翌99	09
The above named entity submits this statement fithe obligations of registered agent. SIGNATURE Lignature, typed or glighten name of registered agent. Signature is the statement of the s	- IVENGIEM			Florida. I am familiar with, a	und accept
FILE NOW!!! FEE IS \$550.00	9. Election Campa				
Due by September 7, 2005	Trust Fund Cont		65.00 May Be added to Fees		
10. OFFICERS AND		11.	ADDITIONS/CHANGES TO OF		
NAME LOWERY, VEDA STREET ADDRESS 3121 NW 47TH TERRACE, BLDG. 4-301		NAME STREET ADDRESS 39	wery veda 10 n.w. 30TH T au dendale La	reen ## 4	□ Addition
CITY-ST-ZIP LAUDERDALE LAKES, FL 333		CITY-ST-ZIP L	au dendale la		
NAME STREET ADDRESS CITY-ST-ZIP LAU GERCHALL LAKES FIRE TITLE Delete Delete Delete Delete Delete				☐ Change	Addition
LE 33309 □ Delete ME REET ADDRESS		TITLE NAME STREET ADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP	-	CITY-ST-ZIP		· ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
I hereby certify that the information supplied will indicated on this report or supplemental report of the corporation or the receiver or trustee empty changed, or on an attackment with an address.	is true and accurate and that a powered to execute this report	my signature shall have the t as required by Chapter 6	ne same legal effect as if made unde	er oath; that I am an officer of	or director