SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

, a 41 4	UAL REPO 1996		3 (tary of State CORPORATIONS		
DOCU 1. Corporali	JMENT i	# P 930	00007599 (2)		
VANE	eta, inc.					
Principal Pla	ce of Business		Mailing Address			
MIAMI FL 3			13801 SW 71ST LN Miami FL 33183			
					3. Date Incorporated or Qualified 01/25/1993	3a. Date of Last Report 02/01/1995
	Place of Busine	:SS	2a. Mailing Address		4, FEI Number	Applied For
Suite, Apt	t # elc		Suite, Apt #, etc		65-0437502	Not Approabl \$8.75 Additional
2	, ,, 0.0		27		5. Certificate of Status Desired	Fee Required
City & Sta	ite		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	2	Country 25	Z(p)	Country 30	B. This corporation has liability for a Florida Statutes	
	9. Name a	and Address of Cu	rrent Registered Agent		10. Name and Address of New Re	jistered Agent
BALANI, NEETA				81 Name		
	3801 SW 71S			82 Street Ac	ddress (P.O. Box Number is Not Acceptabl	e)
M	IAMI FL 3318	3		83		
				1 1		
				B4 City		es Zin Codo
11. Pursuani	I to the provisio	ins of Sections 607	0502 and 607.1508, Florida Statu	84 City	rporation submits this statement for the pu	FL 85 Zip Code
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SIGNATURE:

I do hereby certify that the information/supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(x). Florada Statutes I further certify that the information imposated 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 officior or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if chamiled, or on an attachment with an address

GNATURE:

| SUBJECT | STATUTE AND TYPED OR BRANTED NAME OF SIGNING OFFICER OR DIRECTOR. | Director of the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption stated and that my signature and that my signature shall have the same legal effect as if made under oath that my name appears in Block 12 or Block 13 if chamiled, or on an attachment with an address

| Continued the exemption of the exemption of the exemption stated and the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption stated in Section 119 07(3)(x), Florada Statutes I for the exemption of the exempti