## 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 # P93000057266 (7)

VINPAL	J CORPORATION					
Principal Plac	e of Business	Mailing Address			1 10011001 (12 10100 1)111 20111 20111 20111 20111	A  61111 16516 t.616 61118 6111 1651
5453 HAINES RD. NO 2826 10TH ST N						
ST. PETERSBURG FL 33714 #B		<del></del>	DETEROPRISO EL 20704		DO NOT WRITE IN	THIS SPACE
US		ST. PETERSBURG FL 331 US	704		3. Date Incorporated or Qualified	7,10 0.1101
		•			08/11/1993	
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			59-3192730	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						
22		27			5. Certificate of Status Desired	Fee Required
City & State City & State		City & State	<del></del>		6. Election Campaign Financing	\$5.00 May Be
23	3 28				Trust Fund Contribution	
Zip	Country	Zφ	Country	/	8. This corporation owes or has paid th	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		[	10. Name and Address of New Regist	ered Agent
SIY	Y, VINCENT I		81	Name		
28	26 10TH ST N		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
#B						
ST	PETERSBURG FL 33704		83			
			84	City		85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut e of Florida. Such change was	es, the abov authorized b	e-named corp y the corporati	oration submits this statement for the purpoion's board of directors. I hereby accept the	ose of changing its registered e appointment as registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Fk	orida Statute	S.	•	
SIGNATURE						ATE
12.	Signature, typed or printed name of registered at OFFICERS A!	ND DIRECTORS	13.	ent aignature requir	ed when reinstating) D ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGED TO CHITICENE	Change Addition
NAME	SIY, VINCENT I		1.2 NAME			
STREET ADDRESS	2826 10TH ST. NO. #B		1.3 STREET	ADDRESS		
	ST. PETERSBURG FL 33704		1.4 CiTY-3			
CITY-ST-ZIP TITLE			2.1 TITLE	51 - ZIF		Change Addition
NAME			2.2 NAME		•	
STREET ADDRESS	2111 BIRLINGTON AVE.		2.3 STREET	ADDOCCO		
CITY-ST-ZIP	ST. PETERSBURG FL 33713		2. 4 CITY-			
TITLE	OT. TETERIOPORTO TE CONTO	DELETE	2.4 CIT-	21 - Z4r		☐ Change ☐ Addition
NAME		<b>—</b>	3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE	<del>-</del>	DELETE	4,1 TITLE	31-211		☐ Change ☐ Addition
NAME		<b>—</b>	4. 2 NAME			,
STREET ADDRESS			4.3 STREET	ADDRESS		
				1		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S 5.1 TITLE	11-211		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
-				1		
CITY-ST-ZIP TITLE	<del></del> .	☐ DELETÉ	5.4 CITY - S 6.1 TITLE	11-ZIP		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
DINCE HOUNCOO			■ U.O DINCEI	UNDUITOR		

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 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 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 attachment with an address.

CICNATURE.

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**FILED** 

Mar 05 1998 8:00am

Secretary of State