Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90078 033 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000070646

1. Corporation Name

VARDELI	eon and associates, in) ,		•			
	(D)	Mailian Addunas					
Principal Place of Business Mailing Address							
1655 CURFEW ROAD 1655 CURLEW ROAD PALM HARBOR FL 34683 PALM HARBOR FL 34683							
PALM HARBOR FL 34683 PALM HARBOR FL 34683 US US					DO NOT WRITE IN THIS SPACE		
00		•••			3. Date Incorporated or Qualifed		
					10/12/1993		
2. Principal Pi	ace of Business	2a. Mailing Address	-		4. FEI Number	Applied For	
21				59-3205949	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional	
22					3. Certificate of Glatus Desired	Fee Required	
City & State City & State					6. Election Campaign Financing	□ \$5.00 May Be	
23			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country		8. This corporation owes the curr		
24	25		30		Personal Property Tax.	Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New F	Registered Agent	
VADA	DELEGAL EMPLITA M		81	Name			
VARDELEON, EMELITA M			82	82 Street Address (P.O. Box Number is Not Acceptable)			
1655 CURFEW ROAD							
PALM HARBOR FL 34683			83				
			84	City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,							
office or re agent. I a	to the provisions of Sections 607,0006 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such change was all	thonzed by	the comora	ation's board of directors. I hereby accept	pt the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: I	Registered Age	nt signature req	uired when reinstating)	DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1,1 TITLE			Change Addition	
NAME	vardeloen, emelita m		1.2 NAME		VAR DELEON, EME	U/A M	
STREET ADDRESS	1693 ELM PLACE		1.3 STREE	T ADDRESS	1655 CURLEW RO	200	
CITY-ST-ZIP	CLEARWATER FL 34615		1.4 CITY-S	T-ZIP	PALM HARBOR,	FC 39683	
TITLE	DS	☐ DELETE	2.1 TITLE		166	☐ Change ☐ Addition	
NAME	VARDELOEN, JOCELYN		2.2 NAME	1	VARDELEON JOCE 1655 Cuy low Pool		
STREET ADDRESS	1693 ELM PLACE		2.3 STREE	T ADDRESS	1655 curlew Fia		
CITY-ST-ZIP	CLEARWATER FL 34615		2. 4 CITY-5		Paine Hurten, TC	プイ <i>0</i> そう	
TITLE	D	☐ DELETE	3.1 TITLE			Change Addition	
NAME	VARDELEON, ALEJANDRO JR		3.2 NAME	.			
STREET ADDRESS	84 MARONQUILLO, SAN FAFAI	EL	3.3 STREE	TADDRESS			
CITY-ST-ZIP	BULACAN, PHILIPPINES		3.4. CITY-5	ST-ZIP			
TITLE	V	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME	VARDELEON, FERDINAND		4 2 NAME				
STREET ADDRESS	ZONE 7 CALUMPANG, MOLO		4.3 STREE	T ADDRESS			
CITY-ST-ZIP	ILO-ILO CITY, PHILIPPINES		4.4 CITY-S				
TITLE	D	☐ DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME	VARDELEON, FRANKLIN		5.2 NAME				
STREET ADDRESS 60 DAHLIA ST., PETALSVILLE SUBDIVISION			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	ILO-ILO CITY, PHILIPPINES		5.4 CITY-S	T-ZIP			
TITLE	D	☐ DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME	VARDELEON, HENRY		6.2 NAME				
	SMV ROCK GARDEN#1 NIA RO		0.00000	TADDRESS			

QUEZON CITY, PHILIPPINES CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: