

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED


12/12/97

1997 JUL 23 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000074329 (2)**

1. Corporation Name
VNAV AV INC.

Principal Place of Business

**6321 NW 173RD LANE
MIAMI FL 33015
US**

Mailing Address

**P. O. BOX 170272
MIAMI FL 33017
US**

2. Principal Place of Business	2a. Mailing Address
21 18048 SW 24 ST	26 P.O. BOX 825431
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State MIRAMAR, FL	28 City & State MIRAMAR, FL
24 Zip 33029 Country USA	29 Zip 33082 Country USA

3. Date Incorporated or Qualified 10/21/1993	3a. Date of Last Report 04/29/1996
4. FEI Number 65-0467698	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BARRIOS, RICARDO M. 6321 NW 173 LANE MIAMI FL 33015-4404		81 Name BARRIOS, RICARDO M.	
		82 Street Address (P.O. Box Number is Not Acceptable) 18048 SW 24 ST	
		83	
		84 City MIRAMAR FL 85 Zip Code 33029	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRIOS, RICARDO M.	1.2 NAME	700002250657--3
STREET ADDRESS	6321 NW 173 LANE	1.3 STREET ADDRESS	-07/29/97--01067--003
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	V <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRIOS, JULIE ANN	2.2 NAME	
STREET ADDRESS	6321 NW 173RD W	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 in an attachment with an address.

SIGNATURE _____ 7-17-97 954 4m 9m 0

CR2E034 (4/97)

pg 2 of 2



VNAV AV INC • P. O. BOX 825431 • SOUTH FLORIDA, FL 33082

FL Dept Of Revenue

Dear Sirs,

With regard to the notice received indicating it to be the "SECOND NOTICE" for the annual report, I would like to advise you this was the first one I received. This could, perhaps be due to the fact that you show a non-current address on the form.

Although I filed several reports this year (for 1996) which included our new address and also submitted to you a change of address, I see that the old address is still appearing on the form.

Because this company never received the first notice through no fault of its own, I don't think this penalty should be enforced in our case.

The penalty of \$385 is rather unreasonable nevertheless. Penalties of this magnitude are the kind that could drive a small business to simply dissolve; in which case you will get less future revenue.

I am enclosing \$165 and hope you will accept this explanation as it is in fact the sole truth in the matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. M. Barrios'.

R. M. Barrios
VNAV AV Inc.