## 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 # P93000079657 (1)

Principal Place of Business	Mailing Address			
8420 SW 84TH AVE	8420 SW 84TH AVE			
MIAMI FL 33143	Miami Fl 33143			

**FILED** May 14 1998 8:00am Secretary of State

VILU CORPORATION						I I A BINGAN HAR CONTE CINIC BONG BONG BONG CONTE COME BUILD CONTE CONTE				
Pri	Principal Place of Business Mailing Address									I 1001 991 (18 48160 (3))) 00(1) 00(1) 80(1) 80(1) (80(0 ) J)) 0 0110 0111 (80) (80)
	120 SW 84T				8420 SW B4TH AVE					
М	MIAMI FL 33143 MIAMI FL 33143							DO NOT WRITE IN THIS SPACE		
									ŀ	3. Date Incorporated or Qualified
									1	11/18/1993
2. Principal Place of Business			2a. Maitir	2e. Mailing Address					4. FEI Number Applied For	
21			26						<b>65-0465093</b> Not Applicable	
$\overline{}$	Suite, Apt. #, etc.			<u>}</u> 1	Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22	City & State				City & State					Fee Required
23	Only to Olan			28	<u>├</u> ¬					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Zip		Country	Zip	+			,		This corporation owes or has paid the current year Intangible
24			25	29		30				Personal Property Tax due Jurie 30. Yes No
		9. Name	and Address of	Current Registered		·				10. Name and Address of New Registered Agent
		CCARDI, VI					81	Name		
		20 <b>S</b> W 841					82	Street A	Addres	ess (P.O. Box Number is Not Acceptable)
	MI	AMI FL 33	143				Ш			
							<b>B3</b>			
							84	City		FL 85 Zip Code
11	Pursuant	to the provis	eions of Sections 6	07 8502 and 607 150	8 Florida Statuti	ns the a	bovs	o-named	COMPON	oration submits this statement for the purpose of changing its registered
• • • •	office or r	registered a	gent, or both, in th	e State of Florida. Suc	ch change was a	authorize	d by	the corp	oration	on's board of directors. I hereby accept the appointment as registered
	_	am) i <b>s</b> minist W	nm, and accept in	в обяданонь ог, аесп	ON 607.0505, FIC	moa sia	tutes	<b>S</b> i.		
SIG	SNATURE	Signature, type o	d or publish name of tage	anique if applications agont and the if application	tile (NO1)	Registere	d Age	nt signature	required	d when reinsleting) DATE
12.			OLLICE	RS AND DIRECTORS		13,				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITE	E	DP			DELETE	1.5 Ti	TLE			Change L Addition
NAM			RDI, VITO R			1.2 N	AME			
	EET ADDRESS	ľ	W 84TH AVE			-		ADDRESS		
	-ST-ZIP	VS	FL 33143		DELETE	_	ITY-S	T - ZIP		Change Addition
TITL	·		SNO, LUCIANA		Detere	2.1 TI 2.2 N		ł		☐ Change ☐ Addition
	EET ADDRESS		W 84TH AVE					ADDRESS		
	-ST-ZIP		FL 33143					ST-ZIP		
TITL					DELETE	3.1 TI		<u> </u>		Change Addition
NAM	IE					3 2 N	AME	J		
STRI	EET ADDRESS					3 3 S	TREET	ADDRESS		
CITY	'-ST-ZIP					34,0	ITY-S	ST - 21P		
TITU	E				DELETE	4.1 1)	TLE			Change Addition
NAW	ŧ į	Ì				4.2 N	IAME	ļ		
STRI	EET ADORESS					4.3 ST	TREET	ADDRESS		
	-ST-ZIP				Desert		ITY-S	T-ZIP		Chance T Addition
TITL					DELETE	5.1 70		i		☐ Change ☐ Addition
NAM						5.2 N		ADDRECO		
	EET ADDRESS						1846 I 11Y-S'	ADDRESS T 7/10		
TITU	'-ST-ZIP E	- <del></del>			DELETE	5.4 CI		I - ZIF		Change Addition
NAM						6.2 N				
	EET ADDRESS							ADDRESS		
CITY-ST-ZIP				6.4 CITY-ST-ZIP						
		certify that th	o information sun	alind with this filing de	nes not qualify fo				d in Se	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, oppn aparting intent with an address.