

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000083772 1. Corporation Name

VI AND EDDI, INC.

Principal Place of Business

Mailing Address

## FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90208 015 \*\*\*150.00



801 WALNUT D SEFFNER FL 33		801 Walnut Dr. Seffner Fl. 33584									
						3. Date Incorporated or Qualifed	E IN THIS S	PACE_		]	
						4. FEI Number			Applied For	-	
_	ace of Business	2a. Mailing Address	ang Abdress			59-3214065			Not Applicable	-	
21 26						39-32 14003				4	
Suite, Apt.	Suite, Apt. #, etc.	э, Арт. #, етс. 			5. Certificate of Status Desired See Required Fee Required						
City & State	e /	City & State	<b>一</b>			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees					
Zip	Zip Country Zip			ry	•	8. This corporation owes the current year Intangible Personal Property Tax.					
24 25 29 29 3. Name and Address of Current Registered Agent					<del></del>	10. Name and Address of New R				┨	
	9. Name and Address of Curre	nt Registered Agent	8	11 1	Name	10. Name and Address of New A	egistered A	gont		7	
Kt n 3	Babinski, Ed		61								
801	WALNUT DR.		82 Street			ddress (P.O. Box Number is Not Acceptable)					
SEFF	FNER FL 33584		8:	3			_				
	·•		8	14 (	City	64	FL.	85 Zi	p Code	7	
11. Pursuant	to the provisions of Sections 907.05	02 and 807.1508, Florida Statute	the abo	ve-na	amed corpo	1.5°		hanging	ts registered	7	
office or re agent. I a	to the provisions of Sections 907.056 egistered egent o both, in the State m familia with and accept the obligi	of Florida Such thorige was auto atjoys of Section 507.0505 Florid	iorized b a Statute	y the s. E	corporation	ration submits this statement for the h's board of directors. I hereby acception in the board of directors in the board of directors.	it the appoint	ment as	registered		
SIGNATURE	Must 1	X - 1 1 121 14		_		DADINOR	-10-	14			
	Signature, typed or printed name of registered age		gistered Ag	gent sig	gnat <b>g-þg</b> re£	<u> </u>	DATE		TODO 111 40	- 1	
12.		ND DIRECTORS /	13.		1	ADDITIONS/CHANGES TO OF	FICERS AND	☐ Chang		;   ;	
TITLE	D	DELETE	1.1 TITLE					Criang	C	1	
NAME	KULBABINSKI, ED		1.2 NAME								
STREET ADDRESS 801 WALNUT DR.			1.3 STRE								
CITY-ST-ZIP	SEFFNER FL 33584		1.4 CITY-		IP		_	Chang	e	_	
TITLE	D	☐ DELETE	2.1 TITLE					Criaing		1	
NAME	KULBABINSKI, VIOLET		2.2 NAME	.2 NAME .3 STREET ADDRESS						i	
STREET ADDRESS	801 WALNUT DR.		2.3 STRE								
CITY-ST-ZIP	SEFFNER FL 33584		2.4 CITY	-ST-Z	ZIP		_			4	
TITLE		DELETE	3.1 TITLE	.1 TITLE		-		Chang	e - 🗌 Additior	1	
NAME:			3.2 NAME								
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NAME.			4. 2 NAM	\$E						ļ	
STREET ADDRESS			4.3 STREET ADDRESS		DORESS					İ	
CITY-ST-ZIP	•		4.4 CITY-	- ST-ZI	JP			_			
TITLE			5.1 TITLE				_	Chang	e 🔲 Additio	n	
NAME			5.2 NAME	Ε	-			•			
STREET ADDRESS	,		5.3 STRE	EET AD	DORESS						
CITY-ST-ZIP			5.4 CITY	-ST-ZI	uP				*v - +	ì	
TITLE		☐ DELETE	6.1 TITLE	E	-		_	Chang	e 🔲 Additio	n. :	
NAME		,	6.2 NAME	E							
	,	•	6.3 STRE		DDRESS						
STREET ADDRESS	* ****			ET 71						1	

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information thus report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I arn an or trustee empowered to execute the report is true and that my name appears in ent with an address, with all other than the property of the same legal effect as if made under oath; that I arn an entire trustee empowered to execute the report is true. 14. I hereby certify that the information supplied with the indicated on this annual report or supplemental agrilly officer or director of the corporation of the receiver of Block 12 or Block 13 if changed by on the fitte

SIGNATURE