

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000085135 (0)**

1. Corporation Name
VERO GROUP INTERNATIONAL, INC.



Principal Place of Business: **2940 CARDINAL DR VERO BEACH FL 32963**
Mailing Address: **POST OFFICE BOX 4301 VERO BEACH FL 32964 US**

3. Date Incorporated or Qualified: **12/14/1993**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21 **C/O RICHARD B CANDLER**
22 **3111 CARDINAL DRIVE**
23 **VERO BEACH, FL**
24 **32963** 25 **USA**

4. FEI Number: **65-0414869**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**CANDLER, RICHARD B
3111 CARDINAL DR
VERO BEACH FL 32963**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code **FL**

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 re-registering) DATE: _____

12. OFFICERS AND DIRECTORS		DELETED
TITLE	DP	<input type="checkbox"/>
NAME	KOESTOYO, BAMBANK	
STREET ADDRESS	2940 CARDINAL DR	
CITY-ST-ZIP	VERO BCH FL	
TITLE	DS	<input type="checkbox"/>
NAME	KENTZ, FREDRILK C	
STREET ADDRESS	2940 CARDINAL DR	
CITY-ST-ZIP	VERO BCH FL	
TITLE	T	<input type="checkbox"/>
NAME	RUSSELL, JON F	
STREET ADDRESS	2940 CARDINAL DR	
CITY-ST-ZIP	VERO BCH FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	P	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	KOESTOYO, BAMBANK		
1.3 STREET ADDRESS	3111 CARDINAL DRIVE		
1.4 CITY-ST-ZIP	VERO BEACH FL 32963		
2.1 TITLE	S	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	KENTZ, JR., FREDRILK C.		
2.3 STREET ADDRESS	3111 CARDINAL DRIVE		
2.4 CITY-ST-ZIP	VERO BEACH FL 32963		
3.1 TITLE	T	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2 NAME	RUSSELL, JON F.		
3.3 STREET ADDRESS	3111 CARDINAL DRIVE		
3.4 CITY-ST-ZIP	VERO BEACH FL 32963		
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **Jon F Russell** DATE: **4/29/96** DAYTIME PHONE #: **407 234-4445**

CR2E034 (12/95)