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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087005 (3)

١.	Corporation Name	` '	
	VASSEDER, INC.		
_		 	

FILED Jun 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address		T I DO STORE STANDER STRATE HOUSEN OR STEEL BREAD SOURCE FROM A DEST OF DEST OF DEST			
2080 SW 27 AVE.	2080 SW 27 AVE	10 4407			
FT LAUDERDALE FL 33312 US	FT LAUDERDALE FL 3331 US	∠-94 01			
••	50		3. Date Incorporated or Qualified 12/21/1993	3a. Date of Last Report 07/08/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 65-0464421	Applied For	
Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		ו אדטדט נט	Not Applicab	
Suite, Apt. #, etc.	27 Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
3	28		Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	8. This corporation has liability for		
25	29	30		Yes No	
9. Name and Address of Curr	rent Registered Agent	961 41	10. Name and Address of New Re	gistered Agent	
VASSELLO, LORI		81 Name			
2080 SW 27 AVE.		82 Street Ad	ldress (P.O. Box Number is Not Acceptat	ole)	
FT LAUDERDALE FL 33312		83			
		03			
		84 City		85 Zip Code	
Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob-				FL S Zip Code	
	agent and title if applicable (NO	16. Registrored Agent signature rec	quireb when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CONTROL OF THE C	
INTLE ST	DELETE	1.1 TITLE		Change Additu	
VASSELLO, LORI		1.2 NAME			
STREET ADDRESS 2080 SW 27 AVE.		1.3 STREET ADDRESS			
SITY-ST-ZIP FT LAUDERDALE FL		1.4 CITY - ST - ZIP			
IITLE	☐ DELETE	2.1 TITLE		☐ Change ☐ Additi	
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP	☐ DELETE	2. 4 CITY - \$1 - ZIP		Change Additi	
ITTLE	□ vctcit	3.1 TIPLE		— ынапус — Аовин	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS 3.4. CITY-ST-7IP			
CITY-ST-ZIP	☐ DELETE	4.1 TITLE		Change Addition	
NAME	— /-	4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
ITLE	DELETE	5.1 TITLE		Change Addition	
łame .		5.2 NAME	•		
STREET ADDRESS		5.3 STREET ADDRESS			
DITY-ST-ZIP		5.4 CITY-S1-ZIP			
MILE 18 1 (18)	☐ DELETE	6.1 TITLE		Change Addition	
NAME S.		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY - ST - ZIP			

I. I do hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 technique, or on in attachment with an address.

appears in Block 12 or Brock 15 or Brock 15 and additional state of the Secondary Constitution o