

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000087087 (1)**

1. Corporation Name
VMCO, INC.

Principal Place of Business

Mailing Address

C/O CORPORATE DELI
6300 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309

C/O CORPORATE DELI
6300 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/21/1993

3b. Date of Last Report
05/11/1994

4. FEI Number
65-0457551

Applied For
Not Applicable

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 215.01, Florida Statutes ☐ YES ☒ NO

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

26 Suite Apt # etc

22 City & State

27 City & State

23

28

24

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MICHAEL, JOSE
C/O CORPORATE DELI
6300 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2), and 607.15(8), 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 requirements of Section 607.01(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent's Representative

Signature of Registered Agent or Registered Agent's Representative

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '94

1. NAME	D
2. NAME	MICHAEL, JOSE
3. STREET ADDRESS	6300 N.W. 9TH AVE.
4. CITY & STATE	FT. LAUDERDALE FL 33309
5. NAME	
6. NAME	
7. STREET ADDRESS	
8. CITY & STATE	
9. NAME	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	
14. NAME	
15. STREET ADDRESS	
16. CITY & STATE	
17. NAME	
18. NAME	
19. STREET ADDRESS	
20. CITY & STATE	

1. NAME	P/S	☐ Change ☒ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY & STATE		
5. NAME		
6. NAME		
7. STREET ADDRESS		
8. CITY & STATE		
9. NAME		
10. NAME		
11. STREET ADDRESS		
12. CITY & STATE		
13. NAME		
14. NAME		
15. STREET ADDRESS		
16. CITY & STATE		
17. NAME		
18. NAME		
19. STREET ADDRESS		
20. CITY & STATE		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and done so in good faith for the exemption stated in Section 194.01(2), Florida Statutes. I further certify that the information included in this annual report or supplemental annual report is true and accurate and that my registration complies with the requirements for filing of registration for each year an officer or director of the corporation or the receiver or trustee empowered to run the corporation, as required by Chapter 194, Florida Statutes, and that my name appears in Block 12 or Block 13 of the Supplemental Attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

4/2/95