

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000016243 (5)

1. Corporation Name

VAW, INC.

Principal Place of Business
11810 N.W. 23RD ST.
PEMBROKE PINES FL 33026

Mailing Address
11810 N.W. 23RD ST.
PEMBROKE PINES FL 33026

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/01/1994		3a. Date of Last Report	
21		26		4. FFL Number 65-0478209		Applied For Not Applicable	
22		27		5. Certificate of Status Desired X		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24		25		29		30	
24		25		29		30	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILING INC.
3732 N.W. 16TH ST.
FT. LAUDERDALE FL 33311

01	Name
02	Street Address (P.O. Box Number is Not Acceptable)
03	
04	City
FL	05 Zip Code

11. Pursuant to the provisions of Sections 607 (040) and 607 (150), 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 (040), Florida Statutes.

SIGNATURE _____ DATE _____
Name of Agent: _____
Name of Registered Agent: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95	
NAME	D FENSOME, TERRACE 11810 N.W. 23RD ST. PEMBROKE LAKES FL 33026	NAME	☐ Change ☐ Addition
NAME	D FENSOME, SARA M 11810 N.W. 23RD ST. PEMBROKE LAKES FL 33026	NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntary, true, correct and complete, and that I am not aware of any information that would cause this information to be false or misleading. I understand that any false or misleading information may result in the corporation being fined or the officers or directors being fined or imprisoned. I understand that any false or misleading information may result in the corporation being fined or the officers or directors being fined or imprisoned. I understand that any false or misleading information may result in the corporation being fined or the officers or directors being fined or imprisoned.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR