## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

## **PROFIT** CORPORATION **ANNUAL REPORT** 1998 VIPEX CORPORATION

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400029809 (8)

**FILED** Feb 16 1998 8:00am Secretary of State



Principal Place of Business 1110 SW 153RD TERRACE PEMBROKE PINES FL 33027

2. Principal Place of Business

21 8478 NW Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc

26 8478

1110 SW 153RD TERRACE PEMBROKE PINES FL 33027

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/18/1994

Applied For

\$8.75 Additional

Not Applicable

4. FEI Number

65-0483610

5. Certificate of Status Desired

City & State		City & State	+Laxina+	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 33\(	Country	29 33/LC	Country 30 USA	8. This corporation owes or has paid the	current year Intangible
24 351	9. Name and Address of Current		30 0314	Personal Property Tax due June 30.  10. Name and Address of New Register	Yes No
ROI	DRIGUEZ, MARIA D	nogratored Agent	81 Name	10. Hame and Address of New Hogister	ou Agent
1110 SW 153RD TERRACE PEMBROKE PINES FL 33027					
			62 Street Addre	ess (P.O. Box Number is Not Acceptable)	
			83	<del>-</del>	<del> </del>
			84 City	<u> </u>	85 Zip Code
office or re	o the provisions of Sections 607 0502 egistered agent, or both, in the State on familiar with, and accept the obligat	of Horida. Such change was	authorized by the corporation	oration submits this statement for the purposon's board of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE _	<u> </u>				
·····	Signature, typied or porten name of regenerating in		III Registored Agent signature require		<del>-</del>
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	RODRIGUEZ, MARIA D	btten	,		C Change C Rocation
ſ	1110 SW 153RD TERRACE		1.2 NAME		
STREET ADDRESS	PEMBROKE PINES FL 33027		1.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME		Office			E citallo El vocidor
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
		•	<b>1</b> - · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP TITLE		DELFTE	2 4 CITY - ST - ZIP 31 TITLE		Change Addition
NAME			3.2 NAME		LT compt
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CAY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	•		4.4 CITY-ST-ZIP		
TITLE	<del></del>	DELF TE	5.1 TIBLE	<del></del>	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP	·	
14. I hereby c	entry that the information supplied wit on this augual report or supplemental	h this filing does not qualify annual report is true and ac	for the exemption stated in scurate and that my signatur	Section 119.07(3)(i), Florida Statutes. I furthe e shall have the same legal effect as if mad	r certify that the information a under eath; that I am an

officer or director of the corporation of this receiver of trustee empowered to execute this report as required by Block 12 or Block 13 in changed, or on an attachment with an address.

SIGNATURE: