FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 7:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000035843 (9)**

1. Corporation Name:
VAMPIRE CAFE, INC.

Principal Place of Business
2160 CANTERBURY LANE
MELBOURNE FL 32935

Mailing Address
2160 CANTERBURY LANE
MELBOURNE FL 32935

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/10/1994**
3a. Date of Last Report: 5/10/94

2. Principal Place of Business
21 1306 20th STREET (VAMPIRE CAFE INC)
Suite, Apt. #, etc.
22 Vero Beach Fl
City & State
23 32960 USA
Zip 24 32960 Country 25 USA

2a. Mailing Address
26 VAMPIRE CAFE INC
Suite, Apt. #, etc.
27 1306 20th STREET
City & State
28 VERO BEACH Florida
Zip 29 32960 Country 30 USA

4. FEI Number: 59-3236522 — 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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
LAPPALAINEN, PETRI J
2160 CANTERBURY LANE
MELBOURNE FL 32935

10. Name and Address of New Registered Agent
61 Name: LAPPALAINEN PETRI J
62 Street Address (P.O. Box Number is Not Acceptable): 2160 CANTERBURY LN
63
64 City: MELBOURNE FL 65 Zip Code: 32935

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: Petri Lappalainen — Petri LAPPALAINEN Vice PRESIDENT — April 26, 95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT	1.1 TITLE	☐ Change ☐ Addition
NAME	VOITTO LAPPALA	1.2 NAME	
STREET ADDRESS	2160 CANTERBURY LN.	1.3 STREET ADDRESS	
CITY ST ZIP	MELBOURNE Fl. 32935	1.4 CITY ST ZIP	
TITLE	Vice PRESIDENT	2.1 TITLE	☐ Change ☐ Addition
NAME	PETRI LAPPALAINEN	2.2 NAME	
STREET ADDRESS	2430 18th Ave	2.3 STREET ADDRESS	
CITY ST ZIP	VERO BEACH Fl. 32960	2.4 CITY ST ZIP	
TITLE	Sec. & Treas.	3.1 TITLE	☐ Change ☐ Addition
NAME	ERIC LAPPALAINEN	3.2 NAME	
STREET ADDRESS	2160 CANTERBURY LN	3.3 STREET ADDRESS	
CITY ST ZIP	MELBOURNE Fl. 32935	3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		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: Petri Lappalainen — Petri LAPPALAINEN Vice PRESIDENT — April 26 95 — (407) 770-6044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0420429 FP