

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000037962 (5)

1. Corporation Name

V&VFH CORPORATION

Principal Place of Business

1031 N MIAMI BEACH BLVD
N MIAMI BEACH FL 33162

Mailing Address

1031 N MIAMI BEACH BLVD
N MIAMI BEACH FL 33162



2. Principal Place of Business

21 21430 Highland Lakes Blvd

Suite, Apt. #, etc

2a. Mailing Address

26 21430 Highland Lakes Blvd

Suite, Apt. #, etc

22 City & State

23 N. Miami Beach, FL

24 Zip 33179

Country

USA

27 City & State

28 N. Miami Beach, FL

29 Zip 33179

Country

USA

9. Name and Address of Current Registered Agent

WOLF, JORGE ESQ.
1031 N. MIAMI BEACH BLVD.
N. MIAMI BEACH FL 33162

3. Date Incorporated or Qualified

05/19/1994

3a. Date of Last Report

11/27/1995

4. FEI Number

65-0994580

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. 193.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83 21430 Highland Lakes Blvd

84 City N. Miami Beach

FL

85 Zip Code 33179

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FLEISCHMAN, VICTOR
STREET ADDRESS 1031 N MIAMI BEACH BLVD
CITY-ST-ZIP N MIAMI BEACH FL 33162

☐ DELETE

TITLE D
NAME FLEISCHMAN, VICTORINE
STREET ADDRESS 1031 N MIAMI BEACH BLVD
CITY-ST-ZIP N MIAMI BEACH FL 33162

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

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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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/22/96

(305) 892-9500

CR2E034 (3/96)