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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000046209 (0)

Corporation Name	V. A
GLORY LUGGAGE & GIFT	INC.
Principal Place of Business	Mailing Address



	of Business		Mailing Ad	aress				4 1641(60) (10 10)(1				
30 SE 1ST AVE MIAMI FL 33131			30 SE 1ST AVE MIAMI FL 33131									
A D: : 18:					<u> </u>		(le Incorporated o 06/21/1994	r Qualified	3a. Date	of Last F 2/09/19	
2. Principal Pla	ace of Business		2a. Mailing	Address			4. FE	Number				Applied For
Suite, Apt. #	H etc		26 Cuito 4	Sol # sts				65-0499359	<u> </u>		Д	Not Applicable
22	, etc.		27 Soite, P	Apt. #, etc.			5 . Cei	rtificate of Status	Desired			5 Additional Required
City & State	1		City & 5	State			6. Ho	ction Campaign F	anancino			
23			28					st Fund Contribut				May Be
Zip	<u> </u>	Country	Zip	<u> </u>	Country	у	8. This	s corporation has	hability for it	ntangible ta		···
:4	25		29	~~ ***	30	T	1	rida Statutes		□ No		
	9. Name an	a Address of Ci	urrent Registered Ag	gent		7	10. Na	me and Addres	s of New R	egistered A	gent	
HODAN	CUIC V				81	Nanie						
HOBAN,	V 41ST ST				82	Street Ac	Joress (P.O. E	Box Number is No	of Acceptabl	e)		
7333 NY MIAMI F					83	 	· ·					
WILLIAM F	L 00 100				03							
Ť					84	City	·			————	85 Z	p Code
11. Pursuant to	the provisions	of Sections 607	0502 and 607.1508, F	Jorida Statute	no the above	202200		97 T	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	
						poration's b	oration sutim pard of directo	iits this statement ors Thereby acce	. for the purp of the appo	pose of char intment as r	nging its i realistered	registered offic Lagent, Lam
iangmar with	i, and accept tr	ne obligations of,	Section 607.0505, Flo	orida Statutes.							-3	
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4. 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 Statutos. I further certify that the information indicated on this annual report or supplemental annual report is true and architectural and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cylinged, or on an attachment with an address.

SIGNATURE;

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/96 (305)9

(205)577-9414