

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL -3 AM 8:29

DOCUMENT # P94000049491 (1)

1. Corporation Name
V & H, INC.

Principal Place of Business
**661 OLEANDER DR
PLANTATION FL 33317**

Mailing Address
**661 OLEANDER DR
PLANTATION FL 33317**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **07/05/1994** 3a. Date of Last Report

4. FEI Number **650503836** 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. 190.032 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21. Suite Apt. # etc. 26. Suite Apt. # etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PORRH, G. EDWARD
30 E OCEAN BLVD
STUART FL 34904**

81. Name **Shelia G. Horton**

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

84. City **Plantation** FL 85. Zip Code **33317**

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 **Shelia Horton PRES.** **6-26-95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	HORTON, WILLIAM J
STREET ADDRESS	661 OLEANDER DR
CITY, ST, ZIP	PLANTATION FL 33317
TITLE	D
NAME	HORTON, SHELIA G
STREET ADDRESS	661 OLEANDER DR
CITY, ST, ZIP	PLANTATION FL 33317
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.032(1)(b), Florida Statutes. I further certify that the information indicates a true and correct report as 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 or Block 14 or on an attachment with an address.

SIGNATURE: **William J. Horton - Treasurer**

6/4/95 (305) 563-7643