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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jul 02 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000049491 (1)

V & H. INC.

V CL FI	NU.				
Principal Place of Business Mailing Address  661 OLEANDER DR 661 OLEANDER DR					
PLANTATION FL 33317 PLANTATION FL 33317-1821			321		
					3. Date Incorporated or Qualified
2. Principal Place of Business		28. Mailing Address			4. FEI Number Applied For 65-0503836 Not Applied ble
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			0.00
22		27			5. Certificate of Status Desirod
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zφ	Count	ry	This corporation has liability for intangible tax under s. 199.032,
24	25	[29]	30		Florida Statutes Yes X No
HOD	9. Name and Address of Curre	nt negistered Agent	8	1 Name	10. Name and Address of New Registered Agent
TUR 601	rton, shelia g. Oleander drive				
	NTATION FL 33317		8	2 Street /	Address (P.O. Box Number is Not Acceptable)
FLA	MINION IE 65517		8	3	
					1
			8	4 City	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS AN		1f. Registered A	gent signature	required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition
TITLE	d Horton, William J	L DELETE	1.1 THILE		Hoetow, William J
NAME ATREET ADDOCCO	661 OLEANDER DR		1.2 NAM	: F1 ADDRESS	GLI OLEAHOER Drive
STREET ADDRESS CITY-ST-ZIP	PLANTATION FL 33317		1.4 CITY		Plantation, Fl. 33317
TITLE	D	DELFTE	2171116		D/P ☐ Change ☑ Addition
NAME	HORTON, SHELIA G		2.2 NAM.		Horton, SHELIA G.
STREET ADDRESS	661 OLEANDER DR		2.3 STRE	F1 ADDRESS	UGI OLEANDER DRIVE
CITY-ST-ZIP	PLANTATION FL 33317		2. 4 CITY		Pultation, F1, 33317
TITLE		☐ DELETE	3.1 11118		Change Addition
NAME			3.2 NAM		
STREET ADDRESS			3.3 STRE	E1 ADDRESS	
CITY - ST - ZIP		DOLLET	3.4. CITY		
TITLE		DELETE	4.1 1(1),(6)	ł	Change Addition
NAME			4. 2 NAM	1	
STREET ADDRESS				F1 ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITLE		☐ Change ☐ Addilion
NAME			5.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			5.4 CITY		
TITLE		DELETE	G.1 TITLE		Change Addition
NAME			6.2 NAMI	;	
STREET ADDRESS			6.3 STRE	ET ADDRESS	
CITY-ST-ZIP			6.4 CITY		
14. I do hereb	by certify that the information supplice indicated on this annual report or	ed with this filing does not qual	ify for the ex	emption st	tated in Section 119.07(3)(i), Florida Statutes. I further certify that the
I am an of appears in	ficer or director of the corporation on Block 12 or Block 13 if ghanged, c	the receiver or trustee empor or on an attachment with an ad	wered to exe dress.	cute this r	that my signature shall have the same legal effect as if made under oath; that eport as required by Chapter 607, Florida Statutes; and that my name