
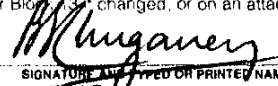


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Morthant Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000053463					
1. Corporation Name VEE KAY ASSOCIATES, INC.					
Principal Place of Business		Mailing Address			
350 LINCOLN RD, STE # 315 MIAMI BEACH, FL. 33139		350 LINCOLN RD, STE#315 MIAMI BEACH, FL. 33139			
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		07/20/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. Date of Last Report	
22		27		9/24/96	
City & State		City & State		4. FFL Number	
23		28		65-0505711	
Zip		Country		Applied For	
24		30		Not Applicable	
25		29		5. Certificate of Status Desired	
29		30		X \$8.75 Additional Fee Required	
29		30		6. Election Campaign Financing	
29		30		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29		30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes	
29		30		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
CHUGANEY, BHAGWANDAS S. ESQ 350 LINCOLN ROAD, SUITE # 315 MIAMI BEACH, FL. 33139			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			FL 85 Zip Code		
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 (Type or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-instating) DATE					
12. OFFICERS AND DIRECTORS					
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					
500002144325					
-04/16/97--01002--033					
***173.75					
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, changed, or on an attachment with an address.					
SIGNATURE: 					
SIGNATURE (Type or printed name of signing officer or director)					
Date 3/20/97 (305) 538-4971					
(305) 672-2296					

CR2E034 (9/96)