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

CORPORATION ANNUAL REPORT



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

1996

P94000079265 (2)

**DOCUMENT #** 1. Corporation Name

VIERA ELEFON, INC.



			•		
Principal Place of Business Mailing Address					NA MARINI WANSI SANDAN HARINA NIMBA WINDE WEST PANT
1793 CRANE CREEK BLVD. 1793 CRANE CRE MELBOURNE FL 32940 MELBOURNE FL 3					
				3. Date Incorporated or Qualified 10/28/1994	3a. Date of Last Report 08/11/1995
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			59-3274943	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State			Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country	Zıp	Country		8. This corporation has liability for i	
24 25	29	30		Florida Statutes Yes No	
g. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	egistered Agent
		8	1 Name		
DIER, WILLIAM G. 1793 CRANE CREEK BLVD		6	2 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
VIERA FL 32940		8	3		
		8	4 City		FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 or registered agent, or both, in the State of Florid	ia. Such change was authoriz	'ad hy the ca	e-named corpor rporation's boa	ration submits this statement for the pur rd of directors. I hereby accept the app	pose of changing its registered office pintment as registered agent. I am
familiar with, and accept the obligations of Sections	on 607.0505, Florida Statutes	6.એરિં	_	2	9 Soul 96
Signature typed or printed name of registered agent			yent signature require		DAT 7
12. OFFICERS AN		13.	<u>,                                      </u>	ADDITIONS/CHANGES TO OFF	Change Addition
TITLE DPST	☐ DELETE	1. 1 TITE			C ontarige
NAME DIER, WILLIAM GEROGE STREET ADDRESS 1793 CRANE CREEK BLVD		1.2 NAM			
1500A PL 44444		•	EET ADDRESS		
CITY-ST-ZIP VIERA FL 32940	☐ DELETE	2 1 TiTi	'-ST-ZIP		Change Addition
TITLE NAME	_		 IE		
STREET ADDRESS			EET ADDRESS		
			-ST-ZIP		
CATY-ST-ZIP			.E		Change Addition
NAME	_	3 2 NAA			
STREET ADDRESS			REET ADDRESS		
CITY-ST-ZIP		3 4 CIT	r-ST-ZIP		
TITLE	☐ DELETE	4 1 111			Change Addition
NAME		4 2 NA	AE .		
STREET ADDRESS		4 3 STR	EET ADDRESS		•
CITY-ST-ZIP		. 44 CIT	r-ST-ZIP		
TITLE	DELETE 5 1		L <b>E</b>		Change Addition
NAME		5 2 NAM	AE .		
STREET ADDRESS		5.3 STF	EET ADORESS		
CITY-ST-ZIP		5 4 CIT	Y-ST-ZIP		
TITLE	DELETE	6 1 TIT	LE		☐ Change ☐ Addition
NAME		6.2 NA			
STREET ADDRESS		63STF	EET ADDRESS		
CITY-ST-ZIP	24 41 2 50		Y - ST - ZIP	for the exemption stated in Section 119	A7/3)/W Florida Statutae Lifutinos

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. Fluring 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 if changed, or on an attachment with an address.

William G. Dier 29 April 96 (407) 255

GRZE034 (12/95)