

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000082631 (0)

1. Corporation Name

VICON INTERNATIONAL PUBLISHING CORP.



Principal Place of Business

Mailing Address

18267 NE 4 CT
MIAMI BEACH FL 33179

18267 NE 4 CT
MIAMI BEACH FL 33179

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

3. Date Incorporated or Qualified

11/08/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0536073

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. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

COLANGELO, STEPHEN A JR.
18267 NE 4 CT
MIAMI BEACH FL 33179

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, typed or printed name of registered agent and the corporation

(If 21b, Registered Agent signature required after recording)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VP
COLANGELO, STEPHEN A. S
79 EAST VIEW DRIVE
VACHALLA NY

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

President
Vincent Colangelo
79 East View Dr.
Vachalla, NY 10595

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

Joe Manusso
468 SE 11th Ave
Dania, FL 33001

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TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition

15 CITY-ST-ZIP ☐ Change ☐ Addition

16 CITY-ST-ZIP ☐ Change ☐ Addition

17 CITY-ST-ZIP ☐ Change ☐ Addition

18 CITY-ST-ZIP ☐ Change ☐ Addition

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47 CITY-ST-ZIP ☐ Change ☐ Addition

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49 CITY-ST-ZIP ☐ Change ☐ Addition

50 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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. 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 registered agent 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 deleted, or added with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Block #

CR2E034 (12/95)