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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000004991 (2)

1. Corporation Name
WILLIAM VAZQUEZ, INC.



Principal Place of Business
8840 N.W. 8TH STREET
PEMBROKE PINES FL 33024

Mailing Address
8840 N.W. 8TH STREET
PEMBROKE PINES FL 33024-6524

3. Date Incorporated or Qualified 01/17/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0555843	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21. State, Apt. #, etc.
22. City & State
23. Zip
24. Country

2a. Mailing Address

26. State, Apt. #, etc.
27. City & State
28. Zip
29. Country

9. Name and Address of Current Registered Agent

VAZQUEZ, WILLIAM
8840 N.W. 8TH STREET
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

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]

(NOTE: Registered Agent signature required when reinstating)

3/14/97
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	VAZQUEZ, WILLIAM	
STREET ADDRESS	8840 N.W. 8TH STREET	
CITY- ST- ZIP	PEMBROKE PINES FL 33024	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VAZQUEZ, JOANN	
STREET ADDRESS	8840 N.W. 8TH STREET	
CITY- ST- ZIP	PEMBROKE PINES FL 33024	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VAZQUEZ, JONATHAN T	
STREET ADDRESS	8840 N.W. 8TH STREET	
CITY- ST- ZIP	PEMBROKE PINES FL 33024	
TITLE	D	<input type="checkbox"/> DELETE
NAME	VAZQUEZ, GREGORY W	
STREET ADDRESS	8840 N.W. 8TH STREET	
CITY- ST- ZIP	PEMBROKE PINES FL 33024	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied by this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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 unchanged, or on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/97

Date

954-431-0481

Daytime Phone

0133014

CR2E034 (9/96)