

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000007189 (0)

1. Corporation Name
THE VSZ CO.



Principal Place of Business
**600 WESTON POINTE CT.
LONGBOAT KEY FL 34228**

Meeting Address
**600 WESTON POINTE CT.
LONGBOAT KEY FL 34228**

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business					2a. Meeting Address				
State, Apt. #, etc.					State, Apt. #, etc.				
City & State					City & State				
Zip					Zip				
Country					Country				

g. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

81	Name
82	Street Address if O. Box Number is Not Acceptable
83	
84	City
85	Zip Code

FL

3. Date Incorporated or Qualified	3a. Date of Last Report
01/27/1995	
4. FEI Number	Applied For Not Applicable
65-0554001	
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 undergirdle tax under s. 199.032, Florida Statutes.	<input type="checkbox"/> Yes <input type="checkbox"/> No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0002 and 607.1303, Florida Statutes, the above named corporation with its statement for the purpose of changing its registered office or registered agent or both, in the State of Florida, said change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of Section 607.0003, Florida Statutes.

SIGNATURE

12.	OFFICERS AND DIRECTORS	<input type="checkbox"/> DELETE
TITLE	PTD	
NAME	PEPE, JOSPEH R	
STREET ADDRESS	600 WESTON POINTE CT. LONGBOAT KEY FL 34228	
CITY, ST, ZIP	VSD	<input type="checkbox"/> DELETE
TITLE	PEPE, DAVID	
NAME	600 WESTON POINTE CT. LONGBOAT KEY FL 34228	
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

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-04/01/96--01020--008
***200.00**

14. I do hereby certify that the information supplied in this filing is a true and correct statement of the business as stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information provided on this annual report of a shareholder's 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 its predecessor or successors, and was duly elected to the position as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changed, or on an additional page with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Handwritten signature and date: 2/28/96

CR2E034 (12/95)

Handwritten number: 83-30-1996