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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000009918 (0)

V.I.C. ENTERPRISES, INC.

SURE ADDRESS OF THE PROPERTY O	Principal Place of Business Mailing Address					4 (BOOKBOY MAR HELDE BAINE BOUM BOWN BOWN BOWN BOWN SHARE (BED) NOON HOLE ISBN				
2				363 MENASHE COURT						
SUPPLY STATES OF THE CONTROL OF THE STATES O							1	1		leport
SURFAIRMS		Place of Business	├ ~, ~	}_				}		
City & State	21						7			
28	22		27	27				Fee Required		
Country 2 2 2 3 3 5 5 2 2 3 3 5 5 5 2 2 3 3 5 5 5 5 5 5 5 5	City & Stat	te		 						
25 29 30 Florida Statutes New Year		Country		Co	untry	, , , , , , , , , , , , , , , , , , , ,	8. This corporation has liability for in	ntangible		
CULBERTSON, HEIDI 383 MENASHE COURT LONGWOOD FL 32779 11. Fursiant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Florida Such change was suthorized by the corporation submits this statement for the purpose of changing lis registered agent, and accept the obligations of Sections 607.0505, Florida Statutes. SIGNAL URL SIGNAL Special a protections of registering and a fine inspication. (WITE Registering Agents engance April agents registering and a remaining and a protection.) Section 607.0505, Florida Statutes. SIGNAL URL SIGNAL Special a protections of registering and a fine inspication. (WITE Registering Agents engance april agents registering and a remaining) DATE CHIEF OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME SIRRIFI ADDRESS CITY SI 27 SIGNAL SPECIAL ROBERS CITY SI 27 SIGNAL SPECIAL ROBERS CITY SI 27 SIGNAL ROBERS SIGNAL SPECIAL ROBERS SIGNAL S	24	25	29	30			Florida Statutes	Yes	No	
CULBERTSON, TIELU 383 MENASHE COURT LONGWOOD FL 32779 11. Fursiant to the provisions of Sections 607 0502 and 607 1508, Florida Stellulos, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos, the above-named corporations board of directors. I hereby accept the eppointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos. SIGNATURE 2. OFFICERS AND DIRECTORS 1.1 TIRE 1.2 LINE 1.2 LINE 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY ST. ZPP 1.4 CITY ST. ZPP 1.5 TARRE 1.5			urrent Registered Agent				10. Name and Address of New Reg	lstered /	Agent	
LONGWOOD FL 32779 Sa					83	Name				
11. Fursiant 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 agent, or both, in the State of Florida Statutes be above-named corporation's board of directors. I hereby accept the appointment as registered agent than familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNAT URE							ess (P.O. Box Number is Not Acceptable)			
The provisions of Sections 607 0502 and 607 1508, Florida Stellulos. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos and accept the obligations of, Section 607 0505, Florida Stellulos and an included with, and accept the obligations of, Section 607 0505, Florida Stellulos and an included with, and accept the obligations of, Section 607 0505, Florida Stellulos and an included agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Stellulos and an included agent. I am familiar with, and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligations of section 607 0505, Florida Stellulos and accept the obligation 607 0505, Florida Stellulos and accept the ob	LON	ACHIOOD FE SEITE			83					
11. Pressure to the provisions of Sections 607 6002 and 607 1508. Florida Statules. The above-named corporation submits this statement for the purposes of changing its registered agent 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statules. SIGNAT URI	i				84	City		EI	85 Zip	Code
12	office or	registered agent, or both, in the	State of Florida. Such change v	vas authorize	ed by	the corporal	poration submits this statement for the pulion's board of directors. I hereby accep	rpose of	changing is ointment as	ts registered registered
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12	SIGNATURE									
TITLE	12				od Age	eni signature requi			DIBECTOR	5S IN 12
NAME STREET ADDRESS 12 NAME 13 STREET ADDRESS 14 CHTY-ST-ZIP					IRF		77.55111011050777110207007110	211011112		
STREET ADDRESS SAS MENASHE COURT 13 STREET ADDRESS		\ •		1		1			_ •	
CITY_ST_ZP LONGWOOD FL	STREET ADDRESS			1.3 \$	TREET	ADDRESS				
DELETE DELETE 21 TITLE Change Addition NAME 22 NAME 23 STREET ADDRESS	CITY - ST - ZIP			1.4 0	iTY-S	ST-ZIP				
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	······································		DELETE						Change	Addition
C1Y-S1-ZIP DELETE 3 TITLE Change Addition	NAME			22 N	IAME	}				
TITLE	STREET ADDRESS			2.3 \$	TREET	ADDRESS				
NAME	C-17 - S1 - 7IP				CITY-	ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP	TOUR		[_] DELETE	3.11	ITLE				Change	Addition
State Stat	NAME				-	l				
DELETE				- 1		1				
A 2 NAME			T Dri str			ST-ZIP		 	Change	Addition
A STREET ADDRESS A STREET ADDRESS A A CITY - ST - ZIP TITLE Change Addition			T DEFEIE			}			Change	LI ADUITION
A4 CITY-ST-ZIP				1		1000000				
DELETE S.1 TITLE				1		1				
STREET ADDRESS			DELETE			51 - ZIP			Change	Addition
			مين مارون							
CITY-SI-7/2* 5.4 CITY-SI-7/2* TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME SIBILET ADDRESS 6.3 SIREET ADDRESS				i i		ANDRESS				
TITLE DELETE 6.1 TITLE Change Addition NAME SIRTET ADDRESS 6.3 SIREET ADDRESS										
NAME SIRIET ADDRESS 6.2 NAME 6.3 STREET ADDRESS			DELETE			//· KII			Спапое	Addition
STREET ADDRESS 6.3 STREET ADDRESS				1						
₹ ·				1		ADDRESS				
CITY - S1 - ZIP 6.4 CITY - S1 - ZIP	CITY - S1 - ZIP					- 1				

4. 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/if changed, or on an attachment with an address.

SIGNATURE:

CNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97

FILED

Apr 18 1997 8:00am

Secretary of State

A HARANGO KAN HAKAT BUKAT BAKAT GARAT GARAT BAKAT BARAT BARAT BAKAT BA

407-774-3222-

0072560