MAY-15-00 02:56 PM SOUTHERNCOLLISION

DOCUMENT # P95000011370

FILED
May 19, 2000 8:00 am
Secretary of State
05-02-2000 90160 048 ***150.00

1. Entity Name

VON ENTERPRISES, INC.

Principal Place of Business	Mailing Address
7231 SW 42 STREET MIAMI FL 33155 US	7231 SW 42 STREET MIAMI FL 33155-4505

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0604368 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WITTMER, STEVEN T
4651 PONCE DE LEON BLVD SUITE 200
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name: Michele LAINE
Street Address (P.O. Box number is Not Acceptable): 255 SE 2ND AVE
Suite 1103
City: MIA FL Zip Code 33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: [signature] Michele R. Laine, PA. for Michele Laine 5/15/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

Field	Entry	
TITLE	PVST	☐ Delete
NAME	VONKUEHLMAN, WILLIAM	
STREET ADDRESS	7231 SW 42 STREET	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	D	☐ Delete
NAME	VONKUEHLMAN, WILLIAM	
STREET ADDRESS	7231 SW 42 STREET	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Field	Entry	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/24/00 305 867 5597
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST VONKUEHLMAN, WILLIAM 7231 SW 42 STREET MIAMI FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	403861
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VONKUEHLMAN, WILLIAM 7231 SW 42 STREET MIAMI FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9

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SIGNATURE: ______ 4/24/00 305 2675597

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #