

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

PROFIT
CORPORATION
ANNUAL REPORT

1998



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

DOCUMENT # P95000014867

1. Corporation Name

VENDRYES ENTERPRISES, INC.

2. Principal Place of Business

Mailing Address

SAME

17643 NW 27th Avenue
Opa Locka, Florida 33056-4007

21. Principal Place of Business

as above

22. Date, Apt. #, etc.

23. City & State

24. Zip

Country

25

2a. Mailing Address

as above

26. Date, Apt. #, etc.

27. City & State

28. Zip

Country

30

9. Name and Address of Current Registered Agent

Andrew Vendryes
19212 NW 23rd Court
Miami, FL 33056

3. Date Incorporated or Qualified

2/22/95

3a. Date of Last Report

4/30/97

4. FEI Number

65-0557579

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. 199.032,
Florida Statutes

Yes No

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 607.1509, 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 of Registered Agent (Required when changing)

DATE

DATE

OFFICERS AND DIRECTORS

PSTD

DELETE

VENDRYES, Andrew Miami,
19212 NW 23rd Ct., FL 33056

DELETE

DELETE

DELETE

DELETE

DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE

Change Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE

Change Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE

Change Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE

Change Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE

Change Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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***150.00

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(d), 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. It is to be an affidavit or declaration 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 on the Black Line Document, or on an attachment with an address.

SIGNATURE:

ANDREW VENDRYES

4/28/98

(305) 626-9607