

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

FILED
Feb 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000022994

1. Corporation Name: **V.B.E. Enterprises, Inc.**

Principal Place of Business 13812 Wright Circle Tampa, FL, 33626	Mailing Address 13812 Wright Circle Tampa, FL 33626
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2. Principal Place of Business 21 13812 Wright Circle Suite, Apt. #, etc. 22 City & State 23 Tampa, FL Zip 24 33626	2a. Mailing Address 26 13812 Wright Circle Suite, Apt. #, etc. 27 City & State 28 Tampa, FL Zip 29 33626	3. Date Incorporated or Qualified 03/30/95	3a. Date of Last Report 02/27/96
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4. FEI Number 59-3306554	Applied For <input type="checkbox"/> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent Davis, Sheldon P. 100 S. Ashley Dr. Suite 890 Tampa, FL 33602	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
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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME V Spencer, Lisa A	<input type="checkbox"/> DELETE	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.2 STREET ADDRESS 13812 Wright Circle		13.2 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 CITY-STATE-ZIP Tampa, FL 33626		13.3 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.4 TITLE P	<input type="checkbox"/> DELETE	13.4 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.5 NAME Spencer, Scott W		13.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.6 STREET ADDRESS 13812 Wright Circle		13.6 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.7 CITY-STATE-ZIP Tampa, FL 33626		13.7 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.8 TITLE S	<input type="checkbox"/> DELETE	13.8 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.9 NAME Spencer, Robert C		13.9 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.10 STREET ADDRESS 13812 Wright Circle		13.10 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.11 CITY-STATE-ZIP Tampa, FL 33626		13.11 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.12 TITLE T	<input type="checkbox"/> DELETE	13.12 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.13 NAME Zinsmeister, Daniel C.		13.13 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.14 STREET ADDRESS 32 E. New Haven Ave.		13.14 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.15 CITY-STATE-ZIP Melbourne, FL		13.15 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.16 TITLE V	<input type="checkbox"/> DELETE	13.16 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.17 NAME Spencer, Ricky T.		13.17 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.18 STREET ADDRESS 13812 Wright Circle		13.18 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.19 CITY-STATE-ZIP Tampa, FL 33626		13.19 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.20 TITLE V	<input type="checkbox"/> DELETE	13.20 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.21 NAME Spencer, Lisa A		13.21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.22 STREET ADDRESS 13812 Wright Circle		13.22 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.23 CITY-STATE-ZIP Tampa, FL 33626		13.23 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.24 TITLE P	<input type="checkbox"/> DELETE	13.24 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.25 NAME Spencer, Scott W		13.25 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.26 STREET ADDRESS 13812 Wright Circle		13.26 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.27 CITY-STATE-ZIP Tampa, FL 33626		13.27 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.28 TITLE S	<input type="checkbox"/> DELETE	13.28 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.29 NAME Spencer, Robert C		13.29 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.30 STREET ADDRESS 13812 Wright Circle		13.30 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.31 CITY-STATE-ZIP Tampa, FL 33626		13.31 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.32 TITLE T	<input type="checkbox"/> DELETE	13.32 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.33 NAME Zinsmeister, Daniel C.		13.33 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.34 STREET ADDRESS 32 E. New Haven Ave.		13.34 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.35 CITY-STATE-ZIP Melbourne, FL		13.35 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.36 TITLE V	<input type="checkbox"/> DELETE	13.36 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.37 NAME Spencer, Ricky T.		13.37 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.38 STREET ADDRESS 13812 Wright Circle		13.38 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.39 CITY-STATE-ZIP Tampa, FL 33626		13.39 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.41 NAME Spencer, Lisa A		13.41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.42 STREET ADDRESS 13812 Wright Circle		13.42 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.44 TITLE P	<input type="checkbox"/> DELETE	13.44 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.45 NAME Spencer, Scott W		13.45 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.46 STREET ADDRESS 13812 Wright Circle		13.46 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.48 TITLE S	<input type="checkbox"/> DELETE	13.48 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.49 NAME Spencer, Robert C		13.49 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.50 STREET ADDRESS 13812 Wright Circle		13.50 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.66 STREET ADDRESS 13812 Wright Circle		13.66 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.67 CITY-STATE-ZIP Tampa, FL 33626		13.67 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.68 TITLE S	<input type="checkbox"/> DELETE	13.68 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.69 NAME Spencer, Robert C		13.69 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.70 STREET ADDRESS 13812 Wright Circle		13.70 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.72 TITLE T	<input type="checkbox"/> DELETE	13.72 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.76 TITLE V	<input type="checkbox"/> DELETE	13.76 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.77 NAME Spencer, Ricky T.		13.77 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.78 STREET ADDRESS 13812 Wright Circle		13.78 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.79 CITY-STATE-ZIP Tampa, FL 33626		13.79 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.80 TITLE V	<input type="checkbox"/> DELETE	13.80 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.81 NAME Spencer, Lisa A		13.81 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.82 STREET ADDRESS 13812 Wright Circle		13.82 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.83 CITY-STATE-ZIP Tampa, FL 33626		13.83 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.84 TITLE P	<input type="checkbox"/> DELETE	13.84 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.96 TITLE V	<input type="checkbox"/> DELETE	13.96 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12.98 STREET ADDRESS 13812 Wright Circle		13.98 NAME <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.99 CITY-STATE-ZIP Tampa, FL 33626		13.99 STREET ADDRESS <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.100 TITLE V	<input type="checkbox"/> DELETE	13.100 CITY-STATE-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. 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: *Lisa Ann Spencer* **LISA ANN SPENCER**
 VICE PRESIDENT
 02/17/97 813 854-2429

CR2E034 (9/96)