

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

APPROVED  
AND  
FILED

97 SEP 29 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000027735 (6)

1. Corporation Name

VEGA & ASSOCIATES OF FLORIDA, INC.



Principal Place of Business

2700 W. MARTIN LUTHER KING BLVD., S-402  
TAMPA FL 33607

Mailing Address

2700 W. MARTIN LUTHER KING BLVD., S-402  
TAMPA FL 33607-6377

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 2071 CHAIN BRIDGE RD

Suite, Apt. #, etc.

27 Suite # 500

City & State

28 VIENNA, VA

Zip

29 22182

Country

30 U.S.A.

3. Date Incorporated or Qualified

04/03/1995

3a. Date of Last Report

04/27/1996

4. FEI Number

31-1459536

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 ☒

9. Name and Address of Current Registered Agent

ROSANA LINARES  
2700 W. MARTIN LUTHER KING BLVD  
SUITE 402  
TAMPA, FL 33607

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 607.1508, 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 a resident of the State of Florida, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Rosana Linares

(NOTE: Registered Agent signature required when reinstating)

DATE

9/22/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME VEGA, FRANCISCO JR

STREET ADDRESS 2071 CHAIN BRIDGE RD #500 ADDRESS

CITY-ST-ZIP VIENNA, VA 22182

TITLE ☐ DELETE

NAME JORGENSEN, MARK

STREET ADDRESS 2700 W. MARTIN LUTHER KING BLVD., S-402

CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ DELETE

NAME VEGA, JUAN

STREET ADDRESS 2071 CHAIN BRIDGE RD.

CITY-ST-ZIP VIENNA VA 22182

TITLE ☐ DELETE

NAME GORDON, RONALD

STREET ADDRESS 2000 14TH ST. N., S-400

CITY-ST-ZIP ARLINGTON VA 22201

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

2.1 STREET ADDRESS

2.2 CITY-ST-ZIP

2.3 NAME

2.4 STREET ADDRESS

2.5 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

ROSANA LINARES 9/22/97 303 803 8770

CR2E034 (9/96)

\$550 Bank

9/29/97