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FILED
May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000034726 (6)
1. Corporation Name
VICON INTERNATIONAL CONSTRUCTION CORPORATION



Principal Place of Business
900 N. FEDERAL HIGHWAY, #460
BOCA RATON FL 33432
US

Mailing Address
900 N. FEDERAL HIGHWAY, #460
BOCA RATON FL 33432-2754
US

2. Principal Place of Business

21

S

1020 NW 6th St, Bldg H&I
Deerfield Beach, FL 33442

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

1020 NW 6th St, Bldg H&I
Deerfield Beach, FL 33442

28

Zip Country

29

30

3. Date Incorporated or Qualified

04/28/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0605773

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

GOODMAN, STEPHEN M
900 N. FEDERAL HWY., SUITE 460
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 1020 NW 6th St, Bldg H&I

84 City Deerfield Beach, FL 33442

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Stephen M. Goodman

4/30/97

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME FASANO, VINCENT J
STREET ADDRESS 900 N FEDERAL HWY #280
CITY-ST-ZIP BOCA RATON FL

TITLE V ☒ DELETE

NAME COLANGELO, VINCENT
STREET ADDRESS 79 EAST VIEW DR
CITY-ST-ZIP VALHALLA NY

TITLE V ☐ DELETE

NAME COLANGELO, STEPHEN
STREET ADDRESS 4882 ROTHSCHILD DR
CITY-ST-ZIP CORAL SPRINGS FL

TITLE S ☐ DELETE

NAME MANCUSO, JOY
STREET ADDRESS 488 SE 11TH TERR
CITY-ST-ZIP DANIA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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.

SIGNATURE

CR2E034 (9/96)