FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

29

9. Name and Address of Current Registered Agent

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1006

25

Zip

24

1996	A STATE OF THE PARTY OF THE PAR	DIVISION OF CORPORATIONS			
DOCUMENT # P95000037096 (1) 1. Corporation Name					
	VANCIAL SYSTEMS, INC.				
Principal Place of Business	W OAKLAND PARK BLVD 1061 W OAKLAND PARK BLVD : 104 SUITE 104				
1061 W OAKLAND PARK BLVD SUITE 104 FT LAUDERDALE FL 33311					
			 Date Incorporated or Qualified 05/08/1995 	3a. Date o	f Last Report t
2. Principal Place of Business	2a. I	Mailing Address	4. FEI Number		Applied For
21	26		65-0591528		Not Applicat
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	[(Oity & State	6. Election Campaign Financing		\$5.00 u. s.

10. Name and Address of New Registered Agent Name STEWART, MAURICE 82 Street Address (P.O. Box Number is Not Acceptable) **6060 NW 44TH WAY COCONUT CREEK FL 33073** 83 84 City Zip Code 85

Country

30

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	Alott, D.	sistered Agent signature require			
12.	OFFICERS AND DIRECTORS	(NOTE: Heg	13.	when reinstating: DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		DELETE	1.1 TITLE	Change	Addition	
NAME	Maurice Stewart	1	1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	6060 N.W. 44th. Way Coconut Creek, F1. 33	3073	1.4 CITY - ST - ZIP			
TITLE		DELETE	2 1 TITLE	Change	Addition	
NAME	Janet Stewart		2.2 NAME			
STREET ADDRESS	6060 N.W. 44th. Way		2.3 STREET ADDRESS			
CITY-ST-ZIP	Coconut Creek, F1. 33	3073	2.4 CITY - ST - ZIP			
THLE			3. 1 TITLE	☐ Change	Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3. STREET ADDRESS			
CITY+ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		DELETE	4. 1 TITLE	☐ Change	Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE .	5. 1 TITLE	Change	☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TOLE		DELETE	6 1 TITLE	☐ Change	☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 in changed, or on an attachment with an address.

SIGNATURE:

MAKURICE STEWART

Daylinie Phone: #

8. This corporation has liability for intangible tax under s. 199.032,

Yes K No

Trust Fund Contribution

Florida Statutes

Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees