5-5-98B- 6489
THE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT May 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000044985 (6) V.M.G. SALES, INC. Mailing Address Principal Place of Business 2904 N. 35TH TERRACE 2904 N. 35TH TERRACE HOLLYWOOD FL 33021-8408 HOLLYWOOD FL 33021-8406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0592539 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes Yes 24 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name GIARDINA, VITO 2904 N. 35TH TERRACE Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 63 84 City 85 Zip Code and 607, 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ons of, Section 607,0505, Florida Statutes. 11. Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent. I am familiar with, and accepted VITO GIARDINA PResiden SIGNATURE stered agent and title if applicat FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 ☐ Change ☐ Addition DELETE TITLE GIARDINA, VITO NAME 2904 N. 35TH TERRACE STREET ADORESS 1.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE 2.1 TITLE GIARDINA, MICHELLE 2.2 NAME 2904 N. 35TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change 4.1 TITLE TITLE

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5.4 CiTY-ST-ZIP

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6.4 CITY-ST-ZIP I hereby certify that the information supplindicated on this annual report or supplied officer or director of the corporation or information. filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in font with an address

Block 12 or Block 13 if changed

HAME STREET ADDRESS

TITLE

NAME

TITL F

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

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