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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary & State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000050317 (3)

VERDI CORPORATION

Principa' Place of Business	Mailing Address
255 S. ORANE AVENUE	255 S. ORANE AVENUE
SUITE 1301	SUITE 1301
ORLANDO FL 32801	ORLANDO FL 32801-3458

FILED Mar 17 1997 8:00am Secretary of State

Principal Place 255 S. ORANE SUITE 1301 OREANDO FL 3	AVENUE	Mailing Address 255 S. ORANE AVENUE SUITE 1301 ORLANDO FL 32801-3459				
Official Company of State of S				3. Date Incorporated or Qualified 3a. Date of L. 06/27/1995 04/15/19	•	
Ի 7NU Fa	ace of Business ist Ridgewood St.	2a. Mailing Address 26 209 East Ridg	rewood St	4. FEI Number APPLIANCE SOR 59-3391536	Applied For	
210 East Ridgewood St. 26 209 East Ridge Suite, Apt #, etc. Suite, Apt #, etc.		,0#004 DE.	\$8	Not Applicable 75 Additional		
22 27			5. Certificate of Status Desired LJ Fe	e Required		
City & State City & State City & City & State City & City & State City & Cit		City & State 28 Orlando, Flo	rida		.00 May Be Ided to Fees	
Ζip	Country	Zip	Country	8. This corporation has liability for intangible tax und		
₂₄ 32801			30 USA	Florida Statutes Yes No		
	9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Registered Agent		
	JAMS, L. MILLER E ESQ.		Jo	hn Vernon Head, P.A.		
	6 ORANGE AVENUE		82 Street	reet Address (P.O. Box Number is Not Acceptable)		
	E 1364 ANDO FL 32801		83 209	East Ridgewood Street		
	NADO PE SZOU					
	•		84 City Orla	indo FL 85	Zip Code 32801	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the above-named	I cornoration submits this statement for the nurrose of change	ing its registered	
office or r agent I a	egistered agent, or both, in the State im famil ar with and accept the obliga	of Florida. Such change was au alions of, Section 607.0505, Flori	thorized by the cor ida Statutes.	poration's board of directors. I hereby accept the appointment	it as registered	
SIGNATURE	Milda	_	HN VERNON	HEAD	ŀ	
	So and Medical protecting of pistered age	on and trie if sophicable (NOTE)	Registered Agent signature	e required when reinstating) DATE	7050 11/10	
12.	OFFICERS AND	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
T TLF NAME	PD HEAD, JOHN V	[] better	1.2 NAME	TU -	lige Addition	
STANT ACORESS	255 S.ORANGE AVENUE, #130	Λ1	1.3 STREET ADDRESS	HEAD, JOHN V	ł	
City-St-ZiP	ORLANDO FL 32801	,	1.4 CITY - ST - ZIP	209 East Ridgewood Street	ŀ	
THILE	OILD VIDO I E OEGO	DELETE	21 TITLE	Orlando, Florida 32801 Chi	inge Addition	
NAME			2.2 NAME			
STREET ADDRESS (2.3 STREET ADDRESS			
DTY ST-7/P			2 4 CITY - ST-ZIP]	
THE		DELETE	3.1 TITLE	□ Ch	ange Addition	
NAME.			3.2 NAME		ļ	
STREET ADJIBESS			3.3 STREET ADDRESS		ļ	
CITY- S1 - 2H			34. CITY-ST-ZIP			
THE		☐ DELETE	4.1 TITLE	☐ Ch	ange Addition	
NAME			4 2 NAME			
STREET ADORESS			4.3 STREET ADDRESS		İ	
017 - 87 - 71P		Theitze	4.4 CITY - ST - ZIP	J I ou	ngg Addition	
TOTE		☐ DELETE	5.1 TITLE	L Chi	ange L Addition	
NAME STORE TO DODE OF			5.2 NAME	İ	į	
STREET ADDRESS			5.3 STREET ADDRESS		ļ	
CITY ST-ZE TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	Ch	ange Addition	
NAME		בין טוננונ	6.2 NAME		Fil upanton	
					ı	
			R 2 CYDECY ADADECC			
STREET ADDRESS CITY ST-ZIP			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP			

te this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or on

WENON HEAD

SIGNATURE: