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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 P95000057867 (0) **DOCUMENT #**

VERY VERO, INC.

Mailing Address

Principal Place of Business 3221 OCEAN DRIVE VERO BEACH FL 32963

3221 OCEAN DRIVE VERO BEACH FL 32963

FILED Feb 17 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/24/1995 2. Principal Place of Business 2a. Mailing Address Applied For 59-3325108 Not Applicable 21 26 Suite, Apt. #. etc. Suite, Apt #, etc \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 **Trust Fund Contribution** Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes □ No 24 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COLOWICH, JOHN F 505 BEACHLAND BLVD., SUITE 4 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32963 83 84 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 (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELFTE Change 1 1 TITLE TITLE FULFORD, VERA H 1.2 NAME NAME 410 46TH COURT 1.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32968 1.4 CiTY - ST - ZIP CITY-ST-ZIP Channe Addition DELETE TITLE 2.1 TITLE 22 NAME STREET ADDRESS 23 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP ÖELETË Change Addition TITLE 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5 1 TITLE TITE E NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 supplience that 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:

era Futford

<u>561 231.333</u>3