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Jan 22 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 # P95000062705 (5)

1. Corporation Name  
V.O.A. ENTERPRISES, INC.



Principal Place of Business  
1001 NO. MACDILL AVENUE  
TAMPA FL 33607

Mailing Address  
1001 NO. MACDILL AVENUE  
TAMPA FL 33607-5126

3. Date Incorporated or Qualified 08/14/1995  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business  
21 6807 Wilshire Ct.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 6807 Wilshire Ct.  
Suite, Apt. #, etc.

4. FEI Number APPLIED FOR 59-3347305  
Applied For Not Applicable

22 City & State  
23 Tampa

27 City & State  
28 Tampa

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33615  
25 Hillsborough

29 33615  
30 Hillsborough

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

VALENZUELA, VENELIO B  
7503 WEST HANNA AVENUE  
TAMPA FL 33615

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 6807 Wilshire Ct.  
84 City Tampa FL 85 Zip Code 33615

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 Venelio B. Valenzuela  
Signature typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 01-10-97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	VALENZUELA, VENELIO B	10028 STAFFORD OAK, APT. 704	TAMPA FL 33624	<input type="checkbox"/>
VP	VALENZUELA, OLGA	10028 STAFFORD OAK, APT. 704	TAMPA FL 33624	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
1.1				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2				
1.3				
1.4				
2.1				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2				
2.3				
2.4				
3.1				<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2				
3.3				
3.4				
4.1				<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2				
4.3				
4.4				
5.1				<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2				
5.3				
5.4				
6.1				<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2				
6.3				
6.4				

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: Venelio B. Valenzuela President  
Signature typed or printed name of signing officer or director DATE 01-10-97 (813) 882-4157 Daytime Phone #

CR2E034 (9/96)