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May 02 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 # P95000067023 (8)

1. Corporation Name

V.P. PROPERTIES OF MIAMI, INC.

Principal Place of Business

Mailing Address

7601 E TREASURE DR
#1023
N BAY VILLAGE FL 33141
US

7601 E TREASURE DR
#1023
N BAY VILLAGE FL 33141-4362
US



3. Date Incorporated or Qualified
08/30/1995

3a. Date of Last Report
08/01/1996

4. FEI Number

65-0627922

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOARES, JACQUELINE S.
7601 E TREASURE DR #1023
SUITE 701 -
N BAY VILLAGE FL 33141

81 Name SOARES, JACQUELINE S.

82 Street Address (P.O. Box Number is Not Acceptable)

SUITE 1023

83 7601 E TREASURE DR

84 City N BAY VILLAGE FL

85 Zip Code 33141

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

Jacqueline S. Soares - JACQUELINE SOARES

04/20/97

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PIZZATTO, SENCER J
STREET ADDRESS 2937 SW 27TH AVE. SUITE 201
CITY-ST-ZIP MIAMI FL 33133

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE D
1.2 NAME PIZZATTO, SENCER J.
1.3 STREET ADDRESS 7601 E. TREASURE DR #1023
1.4 CITY-ST-ZIP N BAY VILLAGE FL 33141

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: X

Senc J. Pizzatto

04/20/97 (305) 865-0727

(Signature typed or printed name of signing officer or director)

Date

Daytime Phone #

0194184

CR2E034 (9/96)