

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

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Feb 05 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000080359 (9)

1. Corporation Name  
VCR CORPORATION

Principal Place of Business  
1444 BISCAYNE BLVD., STE 220  
MIAMI FL 33132

Mailing Address  
1444 BISCAYNE BLVD., STE 220  
MIAMI FL 33132-1429



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/19/1995	3a. Date of Last Report 08/29/1996
21	26	4. FEI Number 65-0623738		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RUI VILARINHO, ALBUQUERQUE 800 CLAUGHTON ISLAND DR. #2602 MIAMI FL 33131				10. Name and Address of New Registered Agent	
81				Name	
82				Street Address (P.O. Box Number is Not Acceptable)	
83					
84				City	
				FL 85 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: RUI VILARINHO, ALBUQUERQUE 01.10.1997  
(NOTE: Registered Agent signature required when reinstalling)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	DELETE		1.1 TITLE		Change	Addition
NAME	RUI VILARINHO, ALBUQUERQUE			1.2 NAME			
STREET ADDRESS	800 CLAUGHTON ISLAND DRIVE., #2602			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33131			1.4 CITY-ST-ZIP			
TITLE		DELETE		2.1 TITLE	VP	Change	Addition
NAME				2.2 NAME	CARLOS ALBERTO GIANNOCCARO VILARINHO		
STREET ADDRESS				2.3 STREET ADDRESS	800 CLAUGHTON ISLAND DRIVE # 2602		
CITY-ST-ZIP				2.4 CITY-ST-ZIP	MIAMI FLORIDA 33131		
TITLE		DELETE		3.1 TITLE		Change	Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		DELETE		4.1 TITLE		Change	Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		DELETE		5.1 TITLE		Change	Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		DELETE		6.1 TITLE		Change	Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 supplementary 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: [Signature] 01.10.1997 (305) 358-4004  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)