

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

FILED
May 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **795000096054**
1. Corporation Name

VST, INC

Principal Place of Business
**4501 34th Street
Orlando, FL 32811**

Mailing Address
**P.O. Box 2196
Windermere, FL
34786**

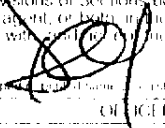
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21. Suite, Apt. #, etc.	26. 237 Ernestine Street	12-20-95	59-3365021	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required	
23. Zip	28. Orlando, FL	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees	
24. Country	29. 32801	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	☐ Yes ☐ No	
25. Country	30. US			

9. Name and Address of Current Registered Agent
**Bradford, Carter A
130 Hillcrest Street
Orlando, FL 32801**

10. Name and Address of New Registered Agent
81. Name Donald L. Moore Jr
82. Street Address (P.O. Box Number is Not Acceptable) 237 Ernestine St
83. City Orlando
84. City FL
85. Zip Code 32801

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 the provisions of Section 607.0505, Florida Statutes.

SIGNATURE:  (NOTE: Registered Agent's signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11. TITLE	☐ Change ☐ Addition
NAME	Donald L. Moore, Jr	12. NAME	
STREET ADDRESS	237 Ernestine Street	13. STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32801	14. CITY-ST-ZIP	
TITLE	VD	21. TITLE	☐ Change ☐ Addition
NAME	Jack Katz	22. NAME	
STREET ADDRESS	4501 34th Street	23. STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32811	24. CITY-ST-ZIP	
TITLE	ST	31. TITLE	☐ Change ☐ Addition
NAME	Catherine Cook	32. NAME	
STREET ADDRESS	4501 SW 34th Street	33. STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32811	34. CITY-ST-ZIP	
TITLE		41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST-ZIP		44. CITY-ST-ZIP	
TITLE		51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST-ZIP		54. CITY-ST-ZIP	
TITLE		61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST-ZIP		64. CITY-ST-ZIP	

14. I 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 of the annual report or supplemental report with an address.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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*****150.00**

4/30/98

CR2E034 (10/97)