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

Mailing Address

JUPITER FL 33458

5600 RIVER CLUB CIRCLE

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000096725

VINYL CONNECTION, INC.

Principal Place of Business

5600 RIVER CLUB CIRCLE JUPITER FL 33458

						12/18/1995		
Principal Place of Business 2a. Mailing Address						4. FEI Number	A	plied For
21	26					65-0630199	N-	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, 27 City & State City & State 28		#, etc.	etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required			
		City & Stat	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country 25	Zip	30	Country		8. This corporation owes the current year Intar Personal Property Tax.	 igible ☐ Yes	□No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	V. Hallo blid Addition of Call			81	Name			
VALA, JYOTI 5600 RIVER CLUB CIRCLE JUPITER FL 33458				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
				84	City	FL	85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered a			_ _	t signature require	ed when reinstating) DATE		
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		ORS IN 12 ☐ Addition
TITLE	P	Ц	DELETE 1	.1 TITLE		,	Change	Addition
NAME	VALA, JYOTI		1	2 NAME]			
STREET ADDRES	ss 5600 RIVER CLUB CIRCLE		1	.3 STREET	ADDRESS			
CITY-ST-ZIP	JUPITER FL 33458			4 CITY-S	r-zip			
TITLE			DELETE : 2	2.1 TITLE			Change	☐ Addition
NAME			2	22 NAME				
STREET ADDRES	ss		P 2	2.3 STREET	ADDRESS	:		
CITY-ST-ZIP				2. 4 CITY-S	T-ZIP		<u> </u>	•
TITLE			DELETE 3	3.1 TITLE	Į.		Change	
NAME								Addition
	}			3.2 NAME				Addition
STREET ADDRES	ss				ADDRESS			Addition
STREET ADDRES	SS		3					
	ss		3	3.3 STREE			☐ Change	Addition
CITY-ST-ZIP	ss		DELETE 4	3.3 STREE			Change	

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 if changed, or on an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ICER OR DIRECTOR

☐ DELETE

DELETE

FILED

Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90019 041 ***158.75

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Daytime Phone #

☐ Change

☐ Change

☐ Addition

Addition