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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000020551 (3)

V-P DEVELOPMENT CORP.

Principal Place of Business Mailing Address									
1373 W 38 PLA HIALEAH FL 33		1373 W 38 PLACE HIALEAH FL 33012							
						3. Date Incorporated or Qualified 03/06/1996	3a. Da	te of Last	Report
2. Principal F	lace of Busmess	2a. Mailing Addr	2a. Mailing Address			4. FEI Number			Applied For
21		26	26			65-0659068			Not Applicable
Suite, Apt. #, etc. 22 City & State		Suite, Apt. #,	Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired Section Fee Required			
		City & State				6. Election Campaign Financing \$5.00 May Be			O May Be
23		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zφ	\vdash	Country		8. This corporation has liability for			rs. 199.032,
24	25	[29]	30	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Cur	rrent Registered Agent		- 04		10. Name and Address of New Ko	gistered /	tgent	
	va, jorge			81	Name	•			
	3 W 38 PLACE		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)			
HIAL	EAH FL 33012								
				83					
				84	City			85 Zi	ip Code
							<u>FL</u>		
office or	to the provisions of Sections 607, registered agent, or both, in the Si am familiar with, and accept the of	tale of Florida. Such chan	ae was autho	rized by	/ the comora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of pt the app	changing ointment	as registered
SIGNATURE									
	Signature, typed or parted name of registeros				nt signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE OF DO 4 NO	DIDECT	ODC (N) 40
12.		AND DIRECTORS		13.	···	ADDITIONS/CHANGES TO OFFI	JEHS AND	Chang	
TIFLE	PTD	☐ D6		1.1 TITLE				C. Cualif	a C Nadition
NAME	VIERA, JORGE		1	12 NAME					
STREET ADDRESS	1373 W 38 PLACE			13 STREET	ADDRESS				
CITY - ST - ZIP	HIALEAH FL 33012			1.4 CITY - S	ST-ZIP			D Obana	- Addition
THTLE	VSD	DI	LETE	2 1 TITLE				L Chang	ge L. Addition
NAME	DOGER, PEDRO			2.2 NAME					
STREET ADDRESS	1441 SW 139 AVE			2.3 STREET	ADDRESS	***	. 46.		
CITY+S1+ZIP	MIAMI FL 33188			2. 4 CITY -	ST-ZIP			F7	- L (A)-
10115		□ DI	LETE	3.1 TITLE				L Chang	ge L. Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ADDRESS				
City+S1+ZIP		.,		3.4. CITY-	ST-ZIP		<u> </u>		
TITLE		□ D:	LLETE	4.1 TITLE				L Chang	ge L Addition
NAME.				4. 2 NAME					
STREET ADORESS				4.3 STREE	ADDRESS				
CITY+S1-ZIP				4.4 CITY - 5	S1-ZIP				
TITLE			LETE	5.1 TITLE				Chang	ge 🔲 Addition
NAME				5.2 NAME	1				
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY-ST-7:P			ŀ	5.4 CITY-1	ST-ZIP				
TIFLE			ELETE	61 TITLE				Chang	ge Addition
NAME				62 NAME					
CTOTAL ADORES					TANNOFES				

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 eath; that I arm an officer or director in 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.