

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

FILED  
Jun 04 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # **P96000025240 (8)**

1. Corporation Name  
**VPC DEVELOPMENT, INC.**



Principal Place of Business <b>8551 W. SUNRISE BLVD., #100-A FT. LAUDERDALE FL 33322</b>	Mailing Address <b>8551 W. SUNRISE BLVD., #100-A FT. LAUDERDALE FL 33322</b>
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>7053 N.W. 3 Ave.</b> Suite, Apt. #, etc. 22 City & State 23 <b>Boca Raton, FL</b> 24 Zip <b>33487</b> 25 Country <b>USA</b>		2a. Mailing Address 26 <b>7053 N.W. 3 Ave</b> Suite, Apt. #, etc. 27 City & State 28 <b>Boca Raton, FL</b> 29 Zip <b>33487</b> 30 Country <b>USA</b>		3. Date Incorporated or Qualified <b>03/20/1996</b>	
		4. FEI Number <b>65-0658296</b>		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent <b>BLOOMGARDEN, PAUL M 8551 W. SUNRISE BLVD., #100-A FT. LAUDERDALE FL 33322</b>				10. Name and Address of New Registered Agent 81 Name <b>C.E. PASSMORE</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>7053 N.W. 3<sup>RD</sup> AVENUE</b> 83 <b>BOCA RATON FL</b> 84 Zip Code <b>33487</b> 85 <b>FL</b>	

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  (NOTE: Registered Agent signature required when reappointing) **5/29/98**

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	NAME	DELETED	11 TITLE	12 NAME	Change Addition
STREET ADDRESS	<b>PASSMORE, C.E.</b>		13 STREET ADDRESS		
CITY-ST-ZIP	<b>7053 N.W. 3 AVENUE BOCA RATON FL 33487</b>		14 CITY-ST-ZIP		
TITLE	NAME	DELETED	21 TITLE	22 NAME	Change Addition
STREET ADDRESS	<b>PASSMORE, JAIME</b>		23 STREET ADDRESS		
CITY-ST-ZIP	<b>7053 N.W. 3 AVENUE BOCA RATON FL 33487</b>		24 CITY-ST-ZIP		
TITLE	NAME	DELETED	31 TITLE	32 NAME	Change Addition
STREET ADDRESS	<b>VECCIA, JOSEPH W JR.</b>		33 STREET ADDRESS		
CITY-ST-ZIP	<b>1100 N. FEDERAL HIGHWAY BOCA RATON FL 33432</b>		34 CITY-ST-ZIP		
TITLE	NAME	DELETED	41 TITLE	42 NAME	Change Addition
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE	NAME	DELETED	51 TITLE	52 NAME	Change Addition
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE	NAME	DELETED	61 TITLE	62 NAME	Change Addition
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 if changed, or on an attachment with an address.

SIGNATURE  **SANDRA B. MORHAM** **5/29/98**

CR2E034 (10/97)