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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000030348 (2)

KING M. HAPPNEY, P.A.

Principal Place of Business

Mailing Address

847 NO COLLIER BLVD. MARCO ISLAND FL 33937 847 NO COLLIER BLVD. MARCO ISLAND FL 34145-2258

FILED May 08 1997 8:00am Secretary of State



×4/28/97 9413948118

						3. Date Incorporated or Qualified 04/08/1996	or Qualified 3a. Date of Last Report			
	lace of Business	28. Mailing Address	28. Mailing Address			4. FEI Number			Applied For	
21		26				65-1/669283			Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Ζιρ 29	29 30			8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes ☐ Yes ☐ No				
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered #	Agent		
HAPPNEY, KING M					81 Name					
847		-	82 Street Addre		ss (P.O. Box Number is Not Acceptate	ole)				
MAR	CO ISLAND FL 33937				,					
ı			1	83						
			ļ.	84 0	City		FL	85 Z	ip Code	
office or re agent. I a SIGNATURE	to the provisions of Soctions 607.050 egisterod agent, or both, in the State in familiar with, and accept the oblight Signature, typed or pratted name of registered age	of Florida. Such change was a ations of, Section 607.0505, Flo	authorized orida Statu	l by thi ites.	e corporatio	oration submits this statement for the poins board of directors. I hereby acceptions when reliabilities	ourpose of of the appo	changing intment	g its registered as registered	
12.		D DIRECTORS	13.	Agent si	ignative regoret	ADDITIONS/CHANGES TO OFFICE		DIRECT	ORS IN 12	
TITLE	D	DELETE	1.1 101	ı E				Chang		
NAME	HAPPNEY, KING M		1.2 NAI	ME	}					
STREET ADDRESS	847 NO COLLIER BLVD.		1.3 STF	REET ADD	DRESS					
CITY-ST-ZIP	MARCO ISLAND FL 33937			Y-\$T-ZI						
TITLE		DELETE	21111					Chang	e [] Addition	
NAME			2.2 NAI	ME	1					
STREET ADDRESS			2.3 STREET ADDRESS		DRESS					
CITY-ST-ZIP			2 4 011	[Y-\$1-Z	MP					
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NAME	3		3.2 NA	ME)					
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CITY-ST-ZIP			3.4. pi)	Y-\$1-Z	'IP					
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NAME			5.2 NA	Μŧ	Ì					
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CITY-ST-ZIP			5.4 CIT	Y - ST - Z(P			_		
TITLE	-	DELETE	6.1 TITL	.E				☐ Chang	e Addition	
NAME			6.2 NAN	νÆ						
STREET ADDRESS			6.3 STR	EE1 ADD	DRESS					
CITY-ST-ZIP				Y-ST-Zh						
14. I do hereb	by certify that the information supplies	d with this filing does not qualit	y for the r	xemp	tion stated	in Section 119.07(3)(i), Florida Statute	s. I further	certify th	at the	
I am an of	ifficer or d irector of the corporation or	оружнена annual report is to the receiver or frustee empow	rue and ac rered to ex	scurati recute	e and mat r this report	ny signature shall have the same lega as required by Chapter 607, Florida S	i enect as latutes: ar	n maoa i nd that m	under datn; tha Vinamo	