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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000034604 (4)

VAE, INC.

Principal Place of Business

5601 NORTH DIXIE HIGHWAY SUITE 411 OAKLAND PARK FL 33334		5601 NORTH DIXIE HIGHWAY SUITE 411 OAKLAND PARK FL 33334-4147								
						<ol> <li>Date Incorporated or Qualified 04/22/1996</li> </ol>	<b>3a</b> . Da	te of Last R	eport	
	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For	
21		26	26			65 <b>-0</b> 661693		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	8	City & State	28			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip <b>29</b>	30 Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curr	ent Registered Agent		81		10. Name and Address of New Re	platered /	igent		
INGLIS, RICHARD K					Name			and the second		
SUITE 320 INTERNATIONAL BLDG. 2455 EAST SUNRISE BLVD.				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			
FT. LAUDERDALE FL 33304				63						
				84	City		FL	<b>65</b> Zip (	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	ites, the at	bove-	-named co	rporation submits this statement for the p		changing it	s registered	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida, Such change was igations of Section 607,0505. F	authorize: Iorida Stat	d by tutes.	the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	it the app	ointment as	registered	
!	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
SIGNATURE	Signature, typed or printed name of registered a	igent and title if applicable (NC	TE: Registered	d Agen	it Bignature requ	uired when reinstating)	DATE		[	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12	
TITLE	D President	DELETE	13 10	1.3 TITLE		•		Change	☐ Addition	
NAME	NORIEGA, RUDY DIXIE		1.2 N/	AME	ŀ		·			
STREET ADORESS	5601 NORTH ĐĐXĐĒ HĪĞHV	VAY #411	1.3 \$3	REET A	ADDRESS					
CITY-ST-ZIP	OAKLAND PARK FL 33334		1.4 CI	TY-ST	- ZIP					
TITLE	Secretary DELETE			TLE				Change	Addition	
NAME	Richard K. Inglis			2.2 NAME						
STREET ADDRESS	Suite 320 International Bldg.			23 STREET ADDRESS					. :	
CITY-ST-ZIP	2455 East Sunrise Blvd.			2 4 CiTY+ST-ZIP						
TITLE				TLE				Change	Addition	
NAME			3.2 NA	<b>W</b> E						
STREET ADDRESS	•		3.3 ST	REET A	ADDRESS				Ì	
CITY-ST-ZIP			3.4. C	11Y-\$1	f-ZIP					
TITLE		☐ DELETE	4.1 TI	TLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
NAME	·		4. 2 N	IAME						
STREET ADDRESS			4.3 \$1	FREET A	ADDRESS					
CITY-ST-ZIP			4.4 CI	TY-ST	-21P					
TITLE		☐ DELETE	5.1 Ti	TLE				Change	☐ Addition	
NAME			5.2 N/	AME						
STREET ADDRESS			5.3 \$1	REET #	ADDRESS				ļ	
CITY-ST-ZIP			54 CI	ITY-ST	-ZiP					
TITLE		DELETE	61 T/	TLE				Change	☐ Addition	
NAME	6		6.2 NJ	AME	ţ				[	
STREET ADDRESS			6.3 S1	TREET A	ADDRESS	·				
CHTY-S1-ZIP			6.4 CI	TY-ST	- ZIP					

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 eupplomental 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 of 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 phanged, or an attachment with an address. (954) 776-6177

**FILED** 

Feb 11 1997 8:00am

Secretary of State

SIGNATURE: