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 # P96000041209 (3)

VACCER REALTY INC.

ncipal Place of Business	Mailing Address		
O BOX 560069	P O BOX 560063		
AMI: FL 33256	MIAMI FL 33256-0063		

FILED May 12 1997 8:00am Secretary of State

. | [2] | [3] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] | [4] |

Principal Plac	e of Business	Mailing Address			i Deile 31001 11318 11011 B5110 1816 1801		
P O BOX 560 MIAMI FL 332		P O BOX 560063 MIAMI FL 33256-0063					
				3. Date Incorporated or Qualified 05/08/1996	3a. Date of Last Report 5-8-94		
⊢ ¬ ' ' ' '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
	Aragon Avenue	26 P O BOX 5601	130	65-0668101	Not Applicable		
Suite, Apt.	• •	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22 Sult City & Stat		City & Ctata			Fee Required		
		City & State		6. Election Campaign Financing	\$5.00 May Be		
23 Cora	11 Gables, F1	28 Miami, F1	Country	Trust Fund Contribution	Added to Fees		
······	4-5008 25 Dade	├ ── `	¬ ′	8. This corporation has liability for i	ntangible tax under s. 199.032, 1 Yes - No		
24 3313	9, Name and Address of Current I	29 33256-0130 3 Beginnered Agent	Dade		<u> </u>		
ADOCK, ANGELA R			Rel	pecca R. Aiduck			
8225 SW 141 ST MIAMI FL 33158			82 Street A	Street Address (P.O. Box Number is Not Acceptable) 8225 SW 141 Street			
			83	D DN 141 DELCCE			
				4			
				Miami	FL 85 Zip Code 33158		
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							
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 Skeleson A. A. Loch REGGER P. ATOURK 4/20197							
	Signature, typed or printed name of registered agent	and trie if applicable (NOTE: F	kog-stored Agent signature re		DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC			
TITLE	President	X DETEIE		President	Change Addition		
NAME	Angela R. Aiduck		1.2 NAME	Rebecca R. Aiduck			
STREET ADDRESS	8225 SW 141 St Miami, F1 33158			3225 SW 141 St			
City-ST-ZIP	M1am1, F1 33158		1.4 CHY-SI-ZIP	Miami, F1 33158			
TITLE		☐ DELETE	21 THLE	•	☐ Change ☐ Addition		
NAME			22 NAME				
STREET ADDRESS			23 STHEET ADDRESS				
CITY-ST-ZIP			2 # CITY-S1-ZIP				
TITLE		L_ DELETE	31 TITLE		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.9 STREET ADDRESS				
City-ST-ZiP			3.4. CITY - ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. P NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 City-St-7IP				

6.4 CITY - S1 - 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 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

Change

Addition

Addition