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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 01 1998 8:00am Secretary of State

DOCUMENT # P96000086358 (4) VECINA, INC.								
Principal Place	of Business	Mailing Address			1 IBOURBU (ID IDIU DIH) BRAN ODNI ODNI ORIV DRIGA I	ALIA BURB BUR DIN	i içii (88 1	
12830 SHADY HILLS ROAD 12830 SHADY HILLS ROAD			AD					
SPRING HILL FL 34610 SPRING HILL FL 34610					DO NOT WRITE IN THI	S SPACE		
					3. Date Incorporated or Qualified]
2. Principal Place of Business 2a. Mailing Address					10/17/1996			1
21	ace of business	26. Mailing Address			4. FEI Number FQ-2448672	4. FEI Number Applie Sp-3446672 Not Applie		┨
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 A		1
22		27			5. Certificate of Status Desired	Fee Rec	quired	
City & State		City & State			6. Election Campaign Financing	\$5.00		
Z ip	Country	28 Zip	Cor	intry	Trust Fund Contribution	Added to		┨
24	25	29	30	,	 This corporation owes or has paid the of Personal Property Tax due June 30. 		No	i
	9, Name and Address of Curren				10. Name and Address of New Registere	d Agent		1
	RVISH, MEHRDAD			81 Name				
	30 SHADY HILLS ROAD			82 Street Ac	Idress (P.O. Box Number is Not Acceptable)	·		1
SPH	RING HILL FL 34610			83				┨
				-				1
				84 City	F	85 Zip C	ode	ı
office or re agent. I an SIGNATURE	ogistered agent, or both, in the State in familiar with and accept the obligation of	of Florida Such change was alions of, Section 607 555, F of and little if applicable (NC	authorize forida Stat	d by the corpo tutes.	prporation submits this statement for the purpose ration's board of directors. I hereby accept the appearance of the purpose 4-20-98 quired when reinstaling)	ppointment as r	egistered	100
12.	OFFICERS AND	DELETE	13.	716	ADDITIONS/CHANGES TO OFFICERS AF	D DIRECTORS Change	Addition	- 8
NAME T/ V/S	DARVISH, MEHRDAD		1.2 N					7
STREET ADDRESS	12830 SHADY HILLS ROAD			TREET ADDRESS				2
CITY+ST-ZIP	SPRING HILL FL 34610			ITY-S1-ZIP]&
TITLE		DELETE	2.1 Ti	1		Change	Addition	C
NAME				AME				l
STREET ADDRESS				IREET ADDRESS	•			
CITY-ST-ZIP TITLE		DELETE	3.1 TI	TLE		Change	☐ Addition	1
NAME			3.2 N	AME				ı
STREET ADDRESS			3 3 51	TREET ADDRESS				
CITY-ST-ZIP		T beleve		etty - St - ZIP			Adams	1
TITLE		L. DELETE	4.1 TH	1		L Change	■ Addition	
NAME STREET ADDRESS			4.2 N	TREET ADDRESS				
CITY-ST-ZIP				TY-\$1-ZIP				1
TITLE		DELETE	5.1 T/			Change	Addition	1
NAME			5.2 N/	AME				
STREET ADDRESS			5.3 \$1	FREET ADDRESS				
CITY-ST-ZIP		T or es	_	TY-ST-ZIP		- T 0:	1 4200	-
TITLE		☐ DELETE	6.1 TI	1		☐ Change		1
NAME CTREET ADORESS			6.2 N/	ame Freet address				
STREET ADDRESS CITY-ST-ZIP								
	ortific that the information complied wi	th this filing does not qualify		TY-ST-ZIP	in Section 110 07/3/6) Florido Statutos I fudhar	portification in	oformation	1

Increus 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 informatio 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 atlachment with an address.