

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morlham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # PA0000097900  
1. Corporation Name  
V.R.U. Holdings, Inc

Principal Place of Business  
39 S.W. 5th Ave  
Miami FL 33130

Mailing Address  
39 S.W. 5th Ave  
Miami FL 33130

3. Date Incorporated or Qualified 11-13-96	3a. Date of Last Report
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 39 S.W. 5th Ave	26 39 SW 5th Ave
Suite, Apt. #, etc	Suite, Apt. #, etc
22	27
City & State	City & State
23 Miami FL	28 Miami FL
Zip	Zip
24 33130	29 33130
Country	Country
25 USA	30 USA

9. Name and Address of Current Registered Agent

Ameri Lawyer Chartered  
343 Almeria Ave.  
Coral Gables FL 33134

10. Name and Address of New Registered Agent

81 Name Hanono, Marcos  
82 Street Address (P.O. Box Number is Not Acceptable)  
39 SW 5th Ave  
83  
84 City Miami FL 85 Zip Code 33130

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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P.O.	<input type="checkbox"/> DELETE
NAME	Hanono, Marcos	
STREET ADDRESS	39 SW 5th Ave	
CITY- ST- ZIP	Miami FL 33130	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	Hanono, Jose	
STREET ADDRESS	39 SW 5th Ave	
CITY- ST- ZIP	Miami FL 33130	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	100002360451-4
1.3 STREET ADDRESS	-12/02/97--01041--010
1.4 CITY- ST- ZIP	****165.00 ****165.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- 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)(c), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APPROVED  
AND  
FILED

97 NOV 26 PM 3:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E034 (9/96)

VEHICLES "R" US INC.

35 S.W. 5th Avenue  
Miami, FL 33130  
Phone: (305) 325-9643

Fax - 305-325-0519

October 22, 1997

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Vehicles R Us, Inc. - M34997  
VRU Holdings, Inc. - PA10 001092900

It has come to our attention we have never received our annual report renewal forms for the mentioned corporations. We are aware that the deadline for filing has past, but we respectfully request a waiver of penalties and late fees as we never received the documentation normally send by the state.

Enclosed please find two checks for 165.00 each. Please process our annual reports as they were filed timely. Your cooperation and understanding is appreciated.

Yours truly,



Marcos Hanono, Director