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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000095653 (7) **DOCUMENT #**

VANTAGE CAPITAL, INC.

Principal Place of Business C/O JERRY M. SYROP

FILED Feb 13 1998 8:00am Secretary of State



Mailing Address C/O JERRY M. SYROP l'184 West cample road 11154 West Sample Road DO NOT WRITE IN THIS SPACE CORAL-SPRINGS FL 83065-2615 CORAL SPRINGS FL 93005-2015 3. Date Incorporated or Qualified 11/14/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10585 NW 5 26 & SAME Not Applicable 65-0706359 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & Stato City & State \$5.00 May Be 6. Election Campaign Financing 23 CORAL SPRINGS, F Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 33076-2803 30 Personal Property Tax due June 30. ☐ Yes □ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SYROP, JERRY M 11154 WEST SAMPLE ROAD Street Address (P.O. Box Number is Not Acceptable) 82 CORAL SPRINGS FL 88065-2615 83 84 City 85 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME SYROP, JERRY M 1.2 NAME 10585 NW 57 TH COURT 11154 WEST SAMPLE RD 13 STREET ADORESS STREET ADDRESS **COPAL-SPRINGS FL** CORAL SPRINGS CITY-ST-ZIP 14 CITY-ST-ZIP DELETE 2 1 TITLE TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 THILE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADORESS CITY - ST - ZIP 54 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 supplicated 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 pame appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

JERRY M. SYROP

1-10-98

フングーノントラ

CR2E034 (10/97