


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

FILED  
Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90005 017 \*\*\*150.00

0206968

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>P96000104348</b>			
1. Corporation Name <b>VENI VIDI VICI, INC.</b>			
Principal Place of Business <b>1249 WASHINGTON AVENUE MIAMI BEACH FL 33139</b>		Mailing Address <b>1249 WASHINGTON AVENUE MIAMI BEACH FL 33139</b>	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>RUBINCHIK, HARVEY L 1776 N. PINE ISLAND RD. SUITE 118 PLANTATION FL 33322</b>		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code
		<b>FL</b>	
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) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	<b>D</b>	<input type="checkbox"/> DELETE	
NAME	<b>RUBINCHIK, HARVEY L ESQ.</b>		
STREET ADDRESS	<b>1776 N. PINE ISLAND RD., SUITE 118</b>		
CITY-ST-ZIP	<b>PLANTATION FL 33322</b>		
TITLE	<b>S</b>	<input type="checkbox"/> DELETE	
NAME	<b>BAGDADI, RAFAEL</b>		
STREET ADDRESS	<b>1249 WASHINGTON AVE</b>		
CITY-ST-ZIP	<b>MIAMI FL 33139</b>		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
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CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>12/31/1996</b>	
4. FEI Number <b>65-0740127</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

427-99

Date

Daytime Phone #

CR2E034 (11/98)