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

FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # P97000004755 (9)

1. Corporation Name
VICON INTERNATIONAL MORTGAGE BROKERAGE, INC

Principal Place of Business
1020 NW 6TH ST BLDG H&I
DEERFIELD BEACH FL 33442

Mailing Address
1020 NW 6TH ST BLDG H&I
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/13/1997

2. Principal Place of Business
21 1650 S. Dixie Highway
Suite, Apt. #, etc.
22 3rd Floor
City & State
23 Boca Ráton, Florida
Zip 24 33432 Country 25 Palm Beach

2a. Mailing Address
26 1650 S. Dixie Highway
Suite, Apt. #, etc.
27 3rd Floor
City & State
28 Boca Raton, Florida
Zip 29 33432 Country 30 Palm Beach

4. FEI Number 65-0740228 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
GOODMAN, STEPHEN M
1020 NW 6TH ST BLDG H&I
DEERFIELD BEACH FL 33442

10. Name and Address of New Registered Agent
81 Name: Denise Battista
82 Street Address (P.O. Box Number is Not Acceptable): 1650 S. Dixie Highway
83 3rd Floor
84 City: Boca Raton FL 85 Zip Code: 33432

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 _____ 1.7.98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	☐ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	VANCE, GARY I		1.2 NAME	Denise Battista	
STREET ADDRESS	1020 NW 6TH ST BLDG H&I		1.3 STREET ADDRESS	1650 S. Dixie Highway, 3rd Floor	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		1.4 CITY-ST-ZIP	Boca Raton, Florida 33432	
TITLE	PD	☒ DELETE	2.1 TITLE	ST	☒ Change ☐ Addition
NAME	COLANGELO, VINCENT		2.2 NAME	Denise Battista	
STREET ADDRESS	1020 NW 6TH ST BLDG H&I		2.3 STREET ADDRESS	1650 S. Dixie Highway, 3rd Floor	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2.4 CITY-ST-ZIP	Boca Raton, Florida 33432	
TITLE	ST	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HAMMETT, SHARLENE		3.2 NAME		
STREET ADDRESS	1020 NW 6TH ST BLDG H&I		3.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	100002401781	☐ Change ☐ Addition
NAME			6.2 NAME	-01/15/98--01080--002	
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I 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.

SIGNATURE _____

CR2E034 (10/97)