


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

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90164 029 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000013563

1. Corporation Name
V.G.B., INC.



Principal Place of Business 1399 NE 27TH COURT POMPANO BEACH FL 33064	Mailing Address 1399 NE 27TH COURT POMPANO BEACH FL 33064
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 1944 2ND AVE SW 23 City & State VERO BCH FL 24 Zip 32962	2a. Mailing Address 26 Suite, Apt. #, etc. 27 1944 2ND AVE SW 28 City & State VERO BCH FL 29 Zip 32962	3. Date Incorporated or Qualified 02/11/1997	4. FEI Number 65-0729236	Applied For Not Applicable
9. Name and Address of Current Registered Agent BUNN, VERNON G 1399 NE 27TH COURT POMPANO BEACH FL 33064		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
		6. Election Campaign Financing <input type="checkbox"/> \$5.00-May Be Added to Fees		
		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		10. Name and Address of New Registered Agent		
		81 Name BUNN, VERNON G.		
		82 Street Address (P.O. Box Number is Not Acceptable) 1944 2ND AVE SW		
		83		
		84 City VERO BCH FL		
		85 Zip Code 32962		

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNN, VERNON G	1.2 NAME	
STREET ADDRESS	1399 NE 27TH COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33064	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1944 2ND AVE SW	2.2 NAME	
STREET ADDRESS	VERO BCH FL 32962	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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, with all other like empowered.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VERNON G BUNN

4/18/99 561 770 6161
Date Daytime Phone #

CR2EN34 (11/98)