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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P97000045927 (5)

THE VCR WORKS, INC.

## **FILED** Feb 24 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				ABRI BILIN INIIN III	
1070 E INDIANTOWN RD 1070 E INDIANTOWN RD				1			
SUITE 310		SUITE 310			DO NOT HIDITS IN THIS SPACE		
JUPITER FL 33477 JUPITER FL 33477					DO NOT WRITE IN THI  3. Date Incorporated or Qualified	3 SPACE	
					•		
2. Principal P	Place of Business	2a. Mailing Address			05/21/1997 4. FEI Number	ΤΔε	plied For
<b>⊢</b> ⊸ '` .	ILLAGE BLUD	26 711 VILLAGE	EBLUD		65-0758275		ot Applicable
Suite Apt		Suite, Apt. #, etc.	7,000				Additional
<b>⊢</b> ⊸ ''	16 102	27 SUITE 102			5. Certificate of Status Desired		equired
City & State	ө	City & State		*******	8. Election Campaign Financing	\$5.00	May Be
23 WEST	PALM BEACH FL	28 WEST PALM	BEACH F	4	Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the o	urrent year Int	angible
24 3340			30 PALM BEA	K/+	Personal Property Tax due June 30.	4-4	No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent	
BERROCAL, CARLOS J 81 Name 5					TEPHEN J. PALERMO	)	
	70 E INDIANTOWN RD		82 Street A	Addres	TEPHEN J. PALERM ( s (P.O. Box Number is Not Acceptable)		
Bu	ITE 310		- $        -$	UU	ILLAGE BLUD SUIT	E 102	
JUF	PITER FL 33477		83				
			84 City			les Zio	Code
			WES	7	PALM BEACH F	L   3 3	3409
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-named of	corpor	ation submits this statement for the purpose	of changing it	s registered
agent. I a	m familiar with, and accept the obliga	ions of, Section 607.0505, Flo	rida Statutes.	OURTO	n's board of directors. I hereby accept the ap	opomiment as	registered
SIGNATURE	Vitenham Al	allimo 5	TEPHEN J.  Registered Agent signature r	PA	LERMO PRES. 2-1	6-98	
				required	when reinstating) DATE		
12.	OFFICERS AND		13.	- A A	ADDITIONS/CHANGES TO OFFICERS AF		
TITLE	D STEPLES	[☐ DELETE	1.1 TITLE		ESIDENT	🔼 Change	
NAME	PALERMO, STEPHEN J		1.2 NAME		LERMO, STEPHEN J.	•	
STREET ADDRESS	749 BLUECREEK DR			101	BONEFISH CR		
CITY-ST-ZIP	WEBSTER NY 14580	T bruste	1.4 CITY - ST - ZIP	JY	PITER FL 33477	1 0: : :	A a are .
TITLE		☐ DELETE	2.1 TITLE			L. Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP		T no see	2 4 CITY-ST-ZIP			Tie	A 1000
TALE		☐ DELET <b>E</b>	3.1 TITLE			L Change	Addition
NAME			3.2 NAME				ļ
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP	<del>-</del>	T Access	3.4. CITY-ST-ZIP				[ ] <b>(</b> ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
TITLE		☐ DELETÉ	4,1 TITLE			☐ Change	Addition
NAME			. 4. 2 NAME		1		
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP			<u> </u>	
TITLE		DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				i
CITY-ST-ZIP			5.4 CITY-ST-ZIP	···········			· <del></del>
TITLE		DELETE	6.1 TITLE		Sand to the base to be such sand to the same	Change	Addition
NAME			6.2 NAME		0000024399   -02/25/98010070		WE
STREET ADDRESS			6.3 STREET ADDRESS			315	1224
CITY-ST-ZIP			6.4 CITY-ST-ZIP		***150.00		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Seption 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.