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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # P97000061147 (9)

1. Corporation Name
VOGART, INC.

[redacted]

Principal Place of Business	Mailing Address
2950 SW 27TH AVENUE #210 MIAMI FL 33133	2950 SW 27TH AVENUE #210 MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/14/1997

2. Principal Place of Business (21) | Suite, Apt. #, etc. (22) | City & State (23) | Zip (24) | Country (25)

Mailing Address: (26) | Suite, Apt. #, etc. (27) | City & State (28) | Zip (29) | Country (30)

4. FEI Number — ✓ 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**

POZSGAY, GEORGE D
2950 SW 27TH AVENUE #210
MIAMI FL 33133

10. **Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 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: George de Pozsgay — 5/7/98
Signature, typed or printed name of individual with authority to sign, and capacity or title — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS			13.		
TITLE	D	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	TIBOR, LOVASI		12 NAME		
STREET ADDRESS	EZREDES U. 7B		13 STREET ADDRESS		
CITY-ST-ZIP	1024 BUDAPEST, HUNGARY		14 CITY-ST-ZIP		
TITLE	D	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	TAMAS, VEGH		22 NAME		
STREET ADDRESS	EZREDES U. 7B		23 STREET ADDRESS		
CITY-ST-ZIP	1024 BUDAPEST, HUNGARY		24 CITY-ST-ZIP		
TITLE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME			42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

Sign Here

14. I hereby certify that the information indicated on this 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 added.

SIGNATURE: [signature] — May 07 98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0184967