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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 12 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062313 (6)

VSP S	ERVICES, INC.				
Principal Plac	ce of Business	Mailing Address			NA
14095 STATE ROAD 7 14095 STATE ROAD 7 DELRAY BEACH FL 33446 DELRAY BEACH FL 33446			3	DO NOT WRITE IN THIS	P. SDACE
				3. Date Incorporated or Qualified	SPACE
				07/17/1997	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0772510	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	· _ ·
24	25 9. Name and Address of Curre		30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
110			81 Name	10. Notice and Address of New Hogisters	n viñolit
T.P.				VIC ERO	
526 EAST PARK AVENUE TALLAHASSEE FL 32301			82 Street Addre	ess (P.O. Box Number is Not Acceptable)  STATE KOAD	
17	ILLAHASSEE PL 32301		83	S SIME COME	
			84 City DEL	RAY BEACH FI	L 85 Zip Code 33444
11. Pursuant	to the provisions of Sections 607.050	12 and 607.1508. Florida Statute			of changing its registered
office or	registered agent, or both, in the State	of Florida, Such change was a	ulhorized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered
Ī	am familiar with, and accept the oblig			4//-	0/00
SIGNATURE	Signature, typed or printed minio of registered as	RES. FRAN	Registered Agent signature require	ad when reinstating) DATE	1//0
12,	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	PERO, FRANK		1.2 NAME		
STREET ADDRESS	14095 STATE ROAD 7		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		1.4 CITY - ST - ZIP		
TITLE	<b>\$</b> D	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	SUMMER. DONALD L		2.2 NAME		
STREET ADDRESS	475 INTERNATIONAL DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WILLIAMSVILLE NY 14221		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME	1		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE	}	L] DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY - ST - ZIP		Change   Addition
TITLE			5.1 TITLE		Change Addition
NAME OTREET ADDRESS			5.2 NAME		
STREET ADDRESS	}		5 3 STREET ADDRESS		ĺ
CITY-ST-ZIP TITLE		DELETE	5.4 CiTY - ST - ZIP 6.1 TITLE		Change Addition
NAME		[] Otto	6.2 NAME		T cusuale T vanignii
	<b>\</b>				
STREET ADDRESS	I ·		6.3 STREET ADDRESS		

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. 4/19/98