SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT# P97000072453 1. Corporation Name

VUJIC INVESTMENTS INCORPORATED

FILED Sep 20, 1999 8:00 am Secretary of State

09-20-1999 90006 014 ***550.00



Principal Place	of Business	Mailing Address				
620 BAYWAY BLVD		620 BAYWAY BLVD				
CLEARWATER FL 33767		CLEARWATER FL 33767			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 08/20/1997	1
	4.0	2a. Mailing Address			4. FEI Number Applied For	
	ace of Business	<u> </u>			59-3472789 - Not Applicable	e
21		Suite, Apt. #, etc.			□ \$8.75 Additional	\dashv
Suite, Apt. #, etc		27			5. Certificate of Status Desired Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	┥.
		28			Trust Fund Contribution Added to Fees	- }
Zip	Country Zip		Cou	intry	8. This corporation owes the current year	
	├ ¬	29	30		Intangible Personal Property. X Yes No	
24		25 29 30 and Address of Current Registered Agent		1	10. Name and Address of New Registered Agent	
	3. Name and Addition			81 Name , /7	200 1/11/16	
Lantos, Edward J				VE	KH YULIC	\dashv
2 98 7	7 - 62ND AVE SOU TH		82 Street Addi		ress (P.O. Box Number is Not Acceptable)	1
S T f	PETERSBURG FL 93742			83	Billion Deve	
						_
	•			84 City	FARWATER FL 85 Zip Code 33767	- {
44 5	, , , , , , , , , , , , , , , , , , ,	2 and 607 1509 Florida Statuta	o the ab	our named com	protion submits this statement for the purpose of changing its registered	\dashv
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	tem tuy	And the description (NC	TE: Penieta	ered Agent signature re	quired when reinstating) DATE	_
	Signature, typed or police frame of registered agent and title if applicable. (NO OFFICERS AND DIRECTORS			Total Agust Signature 10	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	− 8
12.	D	DELETE		TLE	Change Additio	B2F034 (5/99)
NAME	BESEDIC, BOSILKA	Z DELLIE	1.2 N			2
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	CLEARWATER FL 33767			ITY-ST-ZIP		()
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	CLEARWATER FL 33767		2.4 CITY-ST-ZIP			
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				ITY-ST-ZIP		
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CITY-ST-ZIP			6.1 T	TY-ST-ZIP	Change Additio	<u></u>
TITLE		L DELETE	6.2 N/	ĺ	Citatige C Addition	"
NAME						1
STREET ADDRESS				FREET ADDRESS		
CITY-ST-ZIP	diff, that the information availed with	this filing does not qualify for the	6.4 Cl	ntion stated in se	ection 119 07(3)(i) Florida Statutes. I further certify that the information	\dashv
indicated o	n this annual report or suppliemental	annual report is true and accu	rate and	that my signatur	ection 119.07(3)(i), Florida Statutes. I further certify that the information es shall have the same legal effect as if made under oath; that I am equired by Chanter 607. Florida Statutes, and that my name appears	ĺ

in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE

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