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 # . P97000090287 (8)

VEGITEC, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
1591 EAST ATLANTIC BLVD. 1591 EAST ATLANTIC (
POMPANO BEACH FL 33060			P	POMPANO BEACH FL 33080				DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								10/20/1997	
2. Principal I	Place of Busi	ness	2s. N	Mailing Address				4. FEI Number Applied For	
21			26	•				Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				SR 75 Additional	
22			27	7				5. Certificate of Status Desired Fee Required	
City & State				City & State				6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
—, Zip —,	p Country			Zip Country				This corporation owes or has paid the current year Intangible	
24		25	29		30			Personal Property Tax due June 30. Yes INO	
g. Name and Address of Current Registered Agent						81		10. Name and Address of New Registered Agent	
		DNAL COMPANY	services (u	SA) INC.	[,	וס	Name		
		ATLANTIC BLVD.					Street Ad-	eet Address (P.O. Box Number is Not Acceptable)	
	PUMPANO	BEACH FL 33060			ļ.	-			
						83			
					į.	84	City	B5 Zip Code	
								orporation 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, typod or printed induced registered agent and little? epplicable (NOTE Registered Agent signature required when reinstating) DATE									
12.		OFFICERS	AND DIRECT	ORS	13.	_		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE				DELETE	1.1 1111	.E		☐ Change 🔏 Addition	
NAME					1.2 NAM	ΛE	1	HMANY DEBROSHEY P.S.T. 1591 E. ATLANTIC BUD. PSNAMO BEACH, Pr. 33060	
STREET ADDRESS					1.3 STR	EET i	ADDRESS /	1591 E. Arumoric Bus.	
CITY-ST-ZIP	<u> </u>	·	<u></u>		1.4 CIT	Y - \$1	I-ZIP	PONAMO BOACH, Fr. 33060	
TITLE		LJ D		☐ DELETE	2 1 TITLE		ļ	Change L. Addition	
NAME	1				2.2 NAM	ΜE			
STREET ADDRESS					2.3 STR	EET	ADDRESS		
CITY-ST-ZIP	<u> </u>				2. 4 CIT		T-ZIP		
TITLE	ł			DELETE	3.1 7171		}	☐ Change ☐ Addition	
NAME					3.2 NAA		.		
STREET ADDRESS	1				4		Address	į	
CITY-ST-ZIP	 -			DELETE	3.4. CIT		T-ZIP	Chara Daddina	
TITLE	}			LI DELETE	4.1 TITL		-	Change Addition	
NAME					4. 2 NA				
STREET ADDRESS							ADDRESS	,	
CITY-ST-ZIP	_			DELETE	4.4 CITY		- ZIP	Change Addition	
TITLE				בן מכנכוכ	5.1 TITL			Acquinon	
NAME					5.2 NAN			<1h U/15	
STREET ADDRESS							ADDRESS	7/17/1	
CITY-ST-ZIP	 			DELETE	5.4 CITY		- ZIP		
TITLE				FT DEFEIR	6.1 TITL		1	90002489559 ange Addition	
NAME					6.2 NAN			-04/15/9801040029	
STREET ADDRESS	1				6.3 STR	EET /	ADDRESS	***150.00	
CITY OT 74D							210 I		

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 or an attachment with an address.

SIGNATURE:

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2/21/4× (9.

(954)9113-1498