FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2001 8:00 am DOCUMENT # P98000071964 **Secretary of State** V & V MANUFACTURING, INC. 02-19-2001 90271 044 ***150.00 Principal Place of Business Mailing Address 11780 U.S. HIGHWAY ONE 11780 U.S. HIGHWAY ONE SUITE 300 SUITE 300 NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408 2. Principal Place of Business 3. Mailing Address 10475 Riverside uite, Apt, #, etc DO NOT-WRITE IN THIS SPACE. 4. FEI Number Applied For 65-0864306 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FHS CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 11780 U.S. HIGHWAY ONE SUITE 300 NORTH PALM BEACH FL 33408 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE Delete TITLE BERDICHEVSKIY, VLADIMIR A NAME NAME STREET ADDRESS STREET ADDRESS 10475 RIVERSIDE DR -BAY 1 CITY-ST-ZIP CITY-ST-ZIP PALM BCH GARDENS FL 33410 DVPT TITLE Addition ☐ Delete 7 Change TITLE PHAN, VINH NAME NAME STREET ADDRESS 10475 RIVERSIDE DR -BAY 1 STREET ADDRESS CITY-ST-ZIP PALM BCH GARDENS FL 33410 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an efficer 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Idinur Berdichersky Vladimir Berdichersky 2-15-200/56
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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