

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90063 010 ***150.00

DOCUMENT # P98000080533

1. Corporation Name

VERGER INTERNATIONAL, INC.

Principal Place of Business

901 PONCE DE LEON BLVD.
SUITE #601
CORAL GABLES FL 33134

Mailing Address

901 PONCE DE LEON BLVD.
SUITE #601
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/17/1998

4. FEI Number

65-0867173

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 299 W. HILLSBORO BLVD
Suite, Apt. #, etc.

2a. Mailing Address

26 299 W HILLSBORO BLVD
Suite, Apt. #, etc.

23 City & State

DEERFIELD BEACH FL

28 City & State

DEERFIELD BEACH FL

24 Zip

33441

Country

USA

29 Zip

33441

Country

USA

9. Name and Address of Current Registered Agent

ALBORNOZ, WILLIAM H ESQ.
ALBORNOZ, SEGREDO & WEISZ
901 PONCE DE LEON BLVD. SUITE #601
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

GERARDO VAZQUEZ-MELLADO

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

299 W HILLSBORO BLVD

83 City

DEERFIELD BEACH

84 City

DEERFIELD BEACH FL

85 Zip Code

33441

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/99

12. OFFICERS AND DIRECTORS

TITLE D
NAME RODRIGUEZ-BORGIO, JAVIER
STREET ADDRESS 901 PONCE DE LEON BLVD. SUITE 601
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D
NAME LARREA, GUILLERMO
STREET ADDRESS 901 PONCE DE LEON BLVD. SUITE 601
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D
NAME REYNER, MARCO A
STREET ADDRESS 901 PONCE DE LEON BLVD. SUITE 601
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICEPRESIDENT
1.2 NAME GERARDO VAZQUEZ-MELLADO
1.3 STREET ADDRESS 299 W HILLSBORO BLVD
1.4 CITY-ST-ZIP DEERFIELD BEACH FL 33441

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/99

Date

854-481-5955

Daytime Phone #

CR2E034 (11/98)