
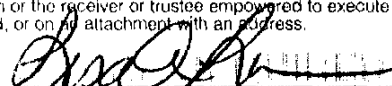


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S19263 (0)			
1. Corporation Name VANDERHELM INTERNATIONAL, INC.			
Principal Place of Business 4811 BEACH BLVD S402 JACKSONVILLE FL 32207		Mailing Address 4811 BEACH BLVD S402 JACKSONVILLE FL 32207-4819	
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country		2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country	
9. Name and Address of Current Registered Agent LANE, LISA ANNE 4811 BEACH BLVD S402 JACKSONVILLE FL 32207		3. Date Incorporated or Qualified 12/18/1990 3a. Date of Last Report 04/17/1996 4. FEI Number 59-3040215 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code FL		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 officer 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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____			
12. OFFICERS AND DIRECTORS 12.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.2 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.3 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.4 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12.5 TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 2.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 3.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 5.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP	
14. I do 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.		4/1/97 904-396-3767	
SIGNATURE:  LISA A. LANE		0031730	

CR2E034 (9/96)