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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 **DOCUMENT # S19263**

1. Corporation Name

VANDERHELM INTERNATIONAL, INC.

## Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90095 017 \*\*\*150.00



Dringinal Place					Mil Millis asası ar	NI BIBLI COOL
r illicipai riace	of Business	Mailing Address				
6480 US 1 NOR	RTH	6480 US 1 NORTH				
ST AUGUSTINE	FL 32095	ST AUGUSTINE FL 32095		DO NOT WRITE IN THIS	SPACE	
US		US		3. Date incorporated or Qualifed		$\overline{}$
				12/18/1990		
0.00	of Business	2a. Mailing Address		4. FEI Number	App	lied For
	ace of Business	26 1851 EXECUTI	NE CTR DR	59-3040215	<u> </u>	Applicable
	XECUTIVE CTR DR	Suite Apt. #, etc.	0 110 01-		\$8.75 A	<u> </u>
(Suite) Apt. #	₩, etc.	——————————————————————————————————————		5. Certifcate of Status Desired	Fee Rec	
22   4		27 / / + City & State	<del></del>	6. Election Campaign Financing	\$5.00	May Be ~
City & State	m tillared fel	28 JACKSINVIL	UE.FL	6. Election Campaign Financing	Added to	
	SUNVILLE, PC	Zip 2 2	Country	8. This corporation owes the current year Inta		
Zip	. 1 - KJV41	29 32207 30	·- i. / A ^	Personal Property Tax.		⊒No I
24 322	9. Name and Address of Current		<u> </u>	10. Name and Address of New Registered	Agent	
	g. Name and Address of Current	Registered Agent	81 Name			
САР	LAN, HOWARD A					
3900 ATLANTIC BLVD			82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
	KSONVILLE FL 32207		83			
JACI	ASSIGNATE FL 32201		65			
			84 City	FL	85 Zip C	ode
					changing its	ragistared
affino or es	saistared agent or both in the State o	it Florida. Such change was allif	ionzeo dy the corboliau	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	ntment as reg	istered
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	a Statutes.			
SIGNATURE				d when reinstating) DATE		<u> </u>
<u> </u>	Signature, typed or printed name of registered agent	<u> </u>	egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
12.	OFFICERS AND	DELETE DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OTT ICENS AN	☐ Change	Addition
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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 of 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 anatomorph with an address with all other like empowered.