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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(6)

VEVS LODGING INC

3.5	NETO	LODGIN	G, INC.												
7															
Principal Place of Business Mailing Address										-	T LOON MINDER 15015 DEIGN 19109 18894 BI	IN CIDIL CIDIA		FI BIBII BIBN IBN	
175	13351 OVER	RSEAS HWY			1335	1 OVERSEAS HIGH	WAY								
	MARATHON FL 33050 MARATHON FL 33050						*****	H-51							
	US										DO NOT WRITE IN THIS SPACE				
1										-	3. Date Incorporated or Qualified				
	.	 .									01/28/1992				
_	Principal Place of Business				2a. Mailing Address					4. FEI Number			Applied For		
21	Suite Ant # etc				26					65-0310747			Not Applicable		
	Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional		
22	City & State				27								Required		
	City & State				City & State						6. Election Campaign Financing	_		May Be	
23	Z ip		Count		[28] Zip		0	- h			Trust Fund Contribution			d to Fees	
-	Zip		_	У	<u> </u>		Cour	ııry		-	8. This corporation owes or has paid				
24			25 Adde	ess of Curren	29 ! Bagistered		30				Personal Property Tax due June 3 10. Name and Address of New Regi		Yes	No No	
				0: 00::011	· .103:2:0190	vAeur		81	Name		In Hame and Address of Men Hegi	PERIO VÕ	ent		
		OBERT BR					Ľ		Maille						
#: 	1800 SECOND ST. SUITE(765X 888							82	Street Ad	Address (P.O. Box Number is Not Acceptable)					
							ļ.	83							
	8	ARASOTA	FL 34236				- 1	83							
÷.							Ī	84	City			FI.	85 Zi	p Code	
11.	Pursuant t	o the provis	ions of Sec	tions 607.0502	2 and 607.15	08. Florida Statute	ove	e-named c	corpora	tion submits this statement for the pu		anging	its registered		
	office or re	egistered ag	ent, or both	h, in the State	of Florida, Su	ich change was a lion 607.0505, Flo	uthorized	by	the corpo	oration'	ation submits this statement for the purion submits this statement for the purion submits the statement for the purion submits the statement of the statement o	the appoin	Iment	as registered	
	_	III IQHTIINGI WI	in, and acc	opi ine obilga	itions or, Sec	110N 607.0505, FIO	rida Statu	nes.	š.						
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE															
12.				FFICERS AND			13.	-		equitor of	ADDITIONS/CHANGES TO OFFICE		RECT	ORS IN 12	
TITU		PD				XX DELETE	1.1 TITL	.E			1.33.1.3.1.6,317.1.1.32.3.1.3.0.1.1.02		Change		
NAM	ε Ι΄	RAUL	SEGUIN				1.2 NAN	AE.	- 1			-	•	_	
STRE	ET ADDRESS			ST STE. 900	l				ADDRESS						
1	-ST-ZIP		OTA FL				1.4 CITY								
mu						DELETE	2 1 7176		I-ZIP	Dw		40	Change	Addition	
HAM		COFFI	N ACC	Chush	人かじ(し	Carl Daniel	2.2 NAM			Cod	esident ffin, Christopher J.	<u>^</u>	Onling	Addition	
••	ET ADDRESS	1800 9	SECOND	CIDEEL	or					100	on istopher J.				
			SOTA FL	SINCE					ADORESS		99 Lincoln Dr. #202				
MILE	-\$T-ZIP	Onine	WIN I C			DELETE	2.4 CIT		1 - ZIP	Sai	rasota, FL 34236		Change	Addition	
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	- 1						3 2 NAW							I	
- 5	ET ADDRESS						•		ADDRESS					Ì	
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NAME	E						6.2 NAM	1E						ĺ	
e The	ET ADDRESS						0.0070		roopece						

14. Thereby 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 for a preference of the corporation in the recent 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 only attachment with an adexess.

SIGNATURE:

Christopher J. Coffin

FILED

May 08 1998 8:00am

Secretary of State