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CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Saridra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

(5)

| V.M. HC | OLDINGS, INC. | | | | | |
|--|---|---|--|---|---|---|
| Principal Place | of Business | Mailing Address | | | | IDAN DIBIN DIDIN DIDIN DIDIN DIDIN DIDIN DIDIN |
| 2345 SW 34TH STREET 2345 SW FORT LAUDERDALE FL 33312 FORT LA | | | STREET ALE FL 33312 | | | |
| US | | US | | | Date Incorporated or Qualified 09/23/1992 | 3a. Date of Last Report 05/01/1995 |
| 2. Principal Pla | ce of Business | 2a. Mailing Addres | SS. | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 65-0361511 | Not Applicable |
| Suite, Apt. # | e, et c | Suite, Apt. #, ∈ | etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | Zip | Count | γ | 8. This corporation has liability for in | |
| 4 | ¬ ¯′ | | 30 | | Florida Statutes 🔲 Yes 🔀 No | |
| ·) | 9. Name and Address of Cu- | rrent Registered Agent | | | 10. Name and Address of New R | egistered Agent |
| | | | 8 | 1 Name | | |
| FEINBER | ig, Jeffrey | | 8 | 2 Street Addr | ess (P.O. Box Number is Not Acceptab | e) |
| | eridan st | | | | | |
| SUITE 30 | | | 8 | 3 | | |
| HOLLYW | OOD FL 33021 | | 8 | 4 City | | FL 85 Zip Code |
| familiar with | ed agent, or both, in the State of the hand accept the obligations of S | Section 607.0505, Florida S | tatutes. | | rd of directors. Thereby accept the appo ਰੂ ਕੁੱਟਰ ਸਭ ਤਰਿਆ ਹੁ | [IA]E |
| 12. | OFFICERS | AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | |
| TITLE | D | DELE DELE | TE 1 1 TIIL | E | | Change Addition |
| NAME | MYDLARZ, JACK | | 1.2 NAM | į. | | |
| STREET ADDRESS | | | | ET ADDRESS | | |
| CITY-ST-ZIP TITLE | BOCA RATON FL | □ DELE | 140/TY FE 2.1 TITL | | | ☐ Change ☐ Addition |
| NAME | | | 2.2 NAM | | | |
| STREET AUDRESS | | | | E! ADORESS | | |
| CITY - ST - ZIP | | | 2 4 011 Y | - ST - ZIP | | |
| TITLE | ☐ DELETE | | TE 3 1 717 L | f | | Change Addition |
| NAME | | | 3.2 NAM | Ł | | |
| STREET ADDRESS | | | 33 S1H | EFT ADDRESS | | |
| CITY - ST - ZIP | | | | - ST - ZIF | | ☐ Change ☐ Add-tion |
| TIFLE | | DELE | | | | |
| NAME | | | 4.2 NAN | | | |
| STREET ADDRESS | | | | ET ADERESS - ST- ZIP | | |
| CITY-ST-ZIF THLE | | DELE | | | | Change Addition |
| NAME | | | 5.2 NAM | | | |
| STREET ADDRESS | | | | ELT ADORESS | | |
| CITY-ST-ZIP | | | 5.4 City | '-ST-70F | | |
| TITLE | | DELETE 6 | | . t | | Change Addition |
| NAME | | | 62 NAV | 16 | | |
| STREET ADDRESS | | | 63 STR | EEI ADDRESS | | |
| C(TY - ST - ZIP | | | 6.4 C(T) | - ST - ZiP | | 67(0.1) Fig. 1- Fr. 1 |
| 14. I do hereb certify that oath; that appears in | by certily that the information support the information indicated on this I am an officer or director of the con Block 12 or Block 13 if disanged | Hed with this filing is volunta annual report or supplement corporation or the receiver of i, or on an attachment with | any turnished and d ntal annual report is or trustee empowers an address. | oes not quarry true and accur d to execute th | for the exemption stated in Section 119 atc and that my signature shall have the is report as required by Chapter 607. Fi | origing, Frontial Statutes Frontier same legal effect as if made under orida Statutes; and that my name |

SIGNATURE: