2005 FOR PROFIT CORPORATION
ANNUAL REPORT

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DOCUI 1. Entity Name GV ON SA	е	# P03000071 NC.				SECRETAR VISION OF C					
					TELES !	J 4	05 JM -6	AM 10:	56		
Principal Place	e of Busines:	3	Mailing Address			n /					
2221 LEE ROAD STE 28 2221 LEE ROAD STE 28						1/1					
WINTER PARK, FL 32789 WINTER PARK, FL 32789						XVX					
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2. Principal Pl	lace of Busin		3. Mailing Address			"\					
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650 S. Northlake Blud Suite, Apt. #, etc.			650 S. Northlake Blvd Suite, Apt. #, etc.				5 . 5	0005	004 (40(00)		
Suite 450			Suite 480			03312005	Chg-P	CHZE	034 (10/03)		
City & State			City & State			4. FEI Numb	er		Ар	plied For	
Altamonte Springs FL			Altamonte Springs F		<u> </u>	20-006	3448		No	t Applicable	
Zip		Country	Zip	Country		5. Certificate	of Status Desired	Z I	\$8.75 Add		
<u>3970</u>		USA	39301	USIA		7 11	A dalana ad Manu I	20-1-1	Fee Required	<u> </u>	
6. Name and Address of Current Registered Agent						7. Name and	Address of New F	tegistered	Agent	-	
LECCESE.	SALVAD	OR		Name							
2221 LEE	ROAD ST	E 28		Street /	Street Address (P.O. Box Number is Not Acceptable)						
-WINTER P	ARK, FL	32789		160	150 5 0 -41 1 1 1 1 1 5 1 4 150						
					650 S. North lake Blud, Suite 450						
				174	an	ode spe	rinas	FL	- 35	701	
			the purpose of changing its	registered office	or register	red agent, or bo	th, in the State of Fl	orida. I am	n familiar with,	and accept	
the obligati	ions of regist	tereo agem.									
SIGNATURE	Signature proed	or printed name of registered agent a	and title if applicable. (NOT	E: Registered Agent sign	ature required	when reinstating)		DATE			
	Olyman II, type I		1								
FIL	E NOW!!!	FEE IS \$150.00	9. Election Campa	-		.00 May Be					
After Ma	ay 1, 200	5 Fee will be \$550.0	Trust Fund Cont	tribution.	J Add	led to Fees				ļ	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OF	FICERS AN	D DIRECTORS	S IN 11	
10. TITLE	PT	OFFICERS AND	DIRECTORS Delete	11.	<u> </u>	ADDITIONS	/CHANGES TO OF	FICERS AN	D DIRECTORS Change	S IN 11	
TITLE NAME	LECCESI	E, SALVADOR		TITLE NAME					Change	Addition	
TITLE NAME STREET ADDRESS	LECCESI 3221 LEE	E, SALVADOR E ROAD SUITE 28		TITLE NAME STREET ADDRESS		S.Nor	Make Bl	ud, S	☑ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LECCESI 3221 LEE	E, SALVADOR	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		S.Nor		ud, S	☑ Change cuite 48 33701	Addition SO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LECCESI 3221 LEE	E, SALVADOR E ROAD SUITE 28		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		S.Nor	Make Bl	ud, S	☑ Change	Addition	
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