

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 AUG 11 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 96000007235

1. Corporation Name
FutureTrak International, Inc. f/k/a Future Vision, Inc.
3635 Park Central Blvd.
North Pompano Beach, FL 33064

Principal Place of Business

Mailing Address

3635 Park Central Blvd.
North Pompano Beach, FL
33064

3. Date Incorporated or Qualified

1/24/96

3a. Date of Last Report

2. Principal Place of Business

21 3635 Park Central Blvd

Suite, Apt. #, etc.

22

City & State

Pompano Beach, FL

Zip

24 33064

Country

25 USA

2a. Mailing Address

26 Same

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

65-0639498

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Jamie Piromalli
396 Hickory Drive
Maitland, FL 32751

10. Name and Address of New Registered Agent

81 Name William F. Lawless & Assoc. PA
82 Street Address (P.O. Box Number is Not Acceptable)
217 NORTH WESTMONTA AVENUE
83 Suite 3022
84 Altamonte Springs FL 85 Zip Code 32714

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 office 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.

X SIGNATURE

Signature of current registered agent (delete if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

8/6/97

12. OFFICERS AND DIRECTORS	
TITLE	☒ DELETE
NAME	D Larry Wald
STREET ADDRESS	2100 NE 17 Ave.
CITY-ST-ZIP	Ft. Lauderdale, FL 33305
TITLE	☒ DELETE
NAME	D Cindy R. Wald
STREET ADDRESS	2100 NE 17 Ave
CITY-ST-ZIP	Ft. Lauderdale, FL 33305
TITLE	☐ DELETE
NAME	D Steve R. Remondini
STREET ADDRESS	21569 Woodstream Terr
CITY-ST-ZIP	Boca Raton, FL 33428
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	☐ Change ☒ Addition
12 NAME	D Steve Brewer
13 STREET ADDRESS	417 Whooping Lane
14 CITY-ST-ZIP	Altamonte Springs, FL 32701
21 TITLE	☐ Change ☒ Addition
22 NAME	D Steve Froelicher
23 STREET ADDRESS	417 Whooping Lane
24 CITY-ST-ZIP	Altamonte Springs, FL 32701
31 TITLE	☒ Change ☐ Addition
32 NAME	D/P Steve R. Remondini
33 STREET ADDRESS	21569 Woodstream Terr
34 CITY-ST-ZIP	Boca Raton, FL 33428
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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

SIGNATURE: Steve Remondini
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/97

Date

Daytime Phone #

CR2E034 (9/96)