

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
 05-16-2001 90187 043 ***150.00

DOCUMENT # P40827

1. Entity Name
BLOCK VISION, INC.

Principal Place of Business

621 NW 53RD ST
 SUITE 600
 BOCA RATON FL 33487
 US

Mailing Address

P.O BOX 310703
 BOCA RATON FL 33431-0703
 US

2. Principal Place of Business

120 W. FAYETTE ST.
 Suite, Apt. #, etc.
 700

3. Mailing Address

120 W. FAYETTE ST.
 Suite, Apt. #, etc.
 700

City & State

BALTIMORE, MD

City & State

BALTIMORE, MD

Zip

21201-3741

Country

USA

Zip

21201-3741

Country

USA

4. FEI Number 22-2512930

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD
 NAME GILLETTE, THEODORE
 STREET ADDRESS 7209 BRYAN DAIRY RD
 CITY-ST-ZIP LARGO FL

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPS
 NAME WEINSTEIN, AUDREY M
 STREET ADDRESS 621 NW 53 STREET
 CITY-ST-ZIP BOCA RATON FL 33487

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME HITE, JENEAN
 STREET ADDRESS 621 NW 53 STREET
 CITY-ST-ZIP BOCA RATON FL 33487

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PT
 NAME ALCORN, ANDREW
 STREET ADDRESS 621 NW 53RD ST
 CITY-ST-ZIP BOCA RATON FL 33487

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard W Jones Richard W. Jones 4/30/01 410-752-0121
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)