

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000152627

**Entity Name:** VISION CLIPS, INC.

**Current Principal Place of Business:**

6031 KIMBERLY BLVD  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

6031 KIMBERLY BLVD  
NORTH LAUDERDALE, FL 33068

**FEI Number:** 59-3807654

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRANT, JASON  
6031 KIMBERLY BLVD  
NORTH LAUDERDALE, FL 33068 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name GRANT, JASON  
Address 6031 KIMBERLY BLVD  
City-State-Zip: NORTH LAUDERDALE FL 33068

Title VP  
Name MCFARLANE, MICHAEL G  
Address 6031 KIMBERLY BLVD  
City-State-Zip: NORTH LAUDERDALE FL 33068

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JASON GRANT

P

02/27/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date