

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000079800

**FILED**  
**Jan 04, 2018**  
**Secretary of State**  
**CC6655013681**

**Entity Name:** BI-SILQUE VISUAL COMMUNICATION PRODUCTS, INC.

**Current Principal Place of Business:**

4171 W HILLSBORO BLVD  
SUITE 10  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4171 W HILLSBORO BLVD  
SUITE 10  
COCONUT CREEK, FL 33073 US

**FEI Number:** 20-4615090

**Certificate of Status Desired:** Yes

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

WRIGHT, ELIZABETH C  
4171 W HILLSBORO BLVD  
SUITE 10  
COCONUT CREEK, FL 33073 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 DE VASCONCELOS, GONCALVES  
MCEO  
Address 4171 W HILLSBORO BLVD  
SUITE 10  
City-State-Zip: COCONUT CREEK FL 33073

Title VP, S  
Name WRIGHT, ELIZABETH CNC  
Address 4171 W HILLSBORO BLVD  
SUITE 10  
City-State-Zip: COCONUT CREEK FL 33073

*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:** ELIZABETH C. WRIGHT

**CCO**

**01/04/2018**

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

\_\_\_\_\_  
Date