

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 293080

1. Entity Name

VISUAL COMMUNICATIONS INCORPORATED

**FILED**  
May 14, 2001 8:00 am  
Secretary of State

05-14-2001 90177 022 \*\*\*158.75

Principal Place of Business

Mailing Address

~~1600 SE 1ST STREET~~  
FORT LAUDERDALE FL 33301  
US

~~1600 SE 1ST STREET~~  
FORT LAUDERDALE FL 33301  
US

2. Principal Place of Business

3. Mailing Address

~~1600 SE 1ST STREET~~ 5820 N.E.  
14 LANE  
Suite, Apt. #, etc.

P.O. Box 70501  
Suite, Apt. #, etc.

City & State

City & State

FT. LAUDERDALE FL

FT. LAUDERDALE FL

Zip Country  
33334 5012 U.S.A.

Zip Country  
33307 U.S.A.

4. FEI Number 59-1206904

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

FOGARTY, ROBERT J  
~~1600 SE 1ST STREET~~  
FT. LAUDERDALE FL

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 PD  
NAME FOGARTY, R J  
STREET ADDRESS ~~1600 SE 1ST STREET~~  
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

TITLE PD  
NAME FOGARTY, R J  
STREET ADDRESS 5820 NE 14 LANE  
CITY-ST-ZIP FT. LAUDERDALE FL 33334-5012 ☒ Change ☐ Addition  
OF ADDRESS ONLY

TITLE ST  
NAME FOGARTY, R B  
STREET ADDRESS ~~1600 SE 1ST STREET~~  
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

TITLE ST  
NAME FOGARTY, R B  
STREET ADDRESS 5820 NE 14 LANE  
CITY-ST-ZIP FT LAUDERDALE FL 33334-5012 ☒ Change ☐ Addition  
OF ADDRESS ONLY

TITLE D  
NAME FOGARTY, R.B.  
STREET ADDRESS ~~1600 SE 1ST STREET~~  
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

TITLE D  
NAME FOGARTY, R.B.  
STREET ADDRESS 5820 NE 14 LANE  
CITY-ST-ZIP FT LAUDERDALE FL 33334-5012 ☒ Change ☐ Addition  
OF ADDRESS ONLY

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

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TITLE  
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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: Robert J. Fogarty

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT J. FOGARTY 4/30/01 954-522-5700

Date

Daytime Phone #

CR2E034 (10/00)