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

**FILED** Jan 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 486040 (9)VISIONARY TECHNOLOGIES, INC. Mailing Address Principal Place of Business 6220 ALMOND TERRACE 6220 ALMOND TERRACE PLANTATION FL 33317-2500 **PLANTATION FL. 33317-2500** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/23/1975 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 59-1621854 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23  $\Box$ 28 Trust Fund Contribution Added to Fees Country Ζiρ Country Zip 8. This corporation owes or has paid the current year Intangible 🗷 Yes ∏ No 24 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 METRAUX, FRANCOIS D Name 6220 ALMOND TERR. 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33317** 83 City 84 85 Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE 1.1 TITLE Change TITLE METRAUX, FRANCOIS D NAME 1.2 NAME 6220 ALMOND TERR. STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE METRAUX, GINGER C 2.2 NAME NAME **6220 ALMOND TERRACE** STREET ADDRESS 2.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ■ Addition TITLE 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

6.4 CITY-ST-7/P

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE.

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

TRANCOIS HETRAUX

DELETE

1/16/92

Change

Addition