2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767657

FILED Apr 05, 2009 Secretary of State

Entity Name: THE VISUAL COMMUNICATIONS GROUP, INC.

Current Principal Place of Business: New Principal Place of Business:

2121 N. BAYSHORE DRIVE, SUITE 1105 1581 BRICKELL AVENUE

MIAMI, FL 33137 #204

MIAMI, FL 33129

Current Mailing Address: New Mailing Address:

2121 N. BAYSHORE DRIVE, SUITE 1105 1581 BRICKELL AVENUE

MIAMI, FL 33137 #204

MIAMI, FL 33129

FEI Number: 59-2423965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AMMONS, HERBERT
2121 N. BAYSHORE DR., STE 1105
MIAMI, FL 33137 US

AMMONS, HERBERT
1581 BRICKELL AVENUE
#204

AMI, FL 33137 US #204 MIAMI, FL 33129 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: HERBERT AMMONS 04/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: KIDD, GLADYS Name: KIDD, GLADYS

Address: 2121 N BAYSHORE DR STE 1105 Name: NIDB, GENOTS
Address: 1581 BRICKELL AVENUE

City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33129

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 MORRIS, URAL
 Name:
 MORRIS, URAL

 Address:
 650 NE 64 STREET APT G408
 Address:
 1581 BRICKELL AVENUE

City-St-Zip: MIAMI, FL 33138 City-St-Zip: MIAMI, FL 33129

Title: PTD () Delete Title: PTD (X) Change () Addition

Name:AMMONS, HERBERT JR,Name:AMMONS, HERBERT JR,Address:2121 N BAYSHORE DR #1105Address:1581 BRICKELL AVENUE

City-St-Zip: MIAMI, FL 33137 City-St-Zip: MIAMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT AMMONS PTD 04/05/2009

Electronic Signature of Signing Officer or Director

Date