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Feb 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000005982 (1)

1. Corporation Name
VISUAL EDGE SYSTEMS INC.



Principal Place of Business
2424 N FEDERAL HWY #100
BOCA RATON FL 33431

Mailing Address
2424 N FEDERAL HWY #100
BOCA RATON FL 33431-7735

3. Date Incorporated or Qualified
11/15/1996

3a. Date of Last Report
FIRST REPORT

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

13-3778895

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TAKEFMAN, EARL
2424 N FEDERAL HWY #100
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name AMI A. TRAUBER - CFO

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/97

12. OFFICERS AND DIRECTORS

TITLE DCVL ☐ DELETE
NAME UBELL, ALAN L
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

TITLE DCEO ☐ DELETE
NAME TAKEFMAN, EARL T
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ DELETE
NAME WILLIAMS, FRANK
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ DELETE
NAME EINHORN, EDDIE
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ DELETE
NAME HERSHHORN, MARK
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

TITLE COO ☐ DELETE
NAME PARKER, RICHARD
STREET ADDRESS 2424 N FEDERAL HWY #100
CITY-ST-ZIP BOCA RATON FL 33431

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/97

751/750-7537

CR2E034 (9/96)