

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003001

Entity Name: VISIOSONIC LTD. CO.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

1881-A DREW ST.
CLEARWATER, FL 33763

New Principal Place of Business:

Current Mailing Address:

21939 U.S. 19 NORTH
CLEARWATER, FL 33765

New Mailing Address:

1881-A DREW ST
CLEARWATER, FL 33765

FEI Number: 59-3561180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPEN, ANTON J
15950 BAY VISTA DRIVE, STE. 220
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCOB () Delete
Name: VANGIERI, JOSEPH
Address: 21939 US 19 NORTH
City-St-Zip: CLEARWATER, FL 33765

Title: S () Delete
Name: KAPLAN, KAREN
Address: 21939 US 19 NORTH
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: RODGERS, NILE
Address: 310 W 52ND ST 2ND FL
City-St-Zip: NEW YORK, NY 10019

Title: D () Delete
Name: STEVENS, JOEL
Address: 11524 AMANDA DR
City-St-Zip: STUDIO CITY, CA 91604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH VANGIERI

PCOB

04/28/2004

Electronic Signature of Signing Officer or Director

Date