FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

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95 MAY -1 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **J27665** **(5)**

1. Corporation Name:
VISMA, INC.

Principal Place of Business	Mailing Address
603 JASMINE DR. MELBOURNE BEACH FL 32951	603 JASMINE DR. MELBOURNE BEACH FL 32951

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/07/1986**
3a. Date of Last Report: **04/14/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # etc. — 22 / 27
City & State — 23 / 28
24 / 25 / 29 / 30

4. FEI Number: **59-2716595** ☐ 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 already or anticipates tax under § 1362 of Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SHAH, UMA M.
603 JASMINE DR.
MELBOURNE BEACH FL 32951

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1602 and 607.1608 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
01 TITLE	PD	☐ Change ☐ Addition
02 NAME	SHAH, MANHAR L.	
03 STREET ADDRESS	603 JASMINE DR.	
04 CITY ST ZIP	MELBOURNE BEACH FL	
05 TITLE	STD	☐ Change ☐ Addition
06 NAME	SHAH, UMA M. .	
07 STREET ADDRESS	603 JASMINE DR.	
08 CITY ST ZIP	MELBOURNE BEACH FL	
09 TITLE	VD	☐ Change ☐ Addition
10 NAME	PARIKH, KISHOR N.	
11 STREET ADDRESS	4 VICTORIA WAY	
12 CITY ST ZIP	KENDALL PARK NJ	
13 TITLE	D	☐ Change ☐ Addition
14 NAME	PARIKH, KOKILA K.	
15 STREET ADDRESS	4 VICTORIA WAY	
16 CITY ST ZIP	KENDALL PARK NJ	
17 TITLE	VD	☐ Change ☐ Addition
18 NAME	KARIA, MAHENDRA V.	
19 STREET ADDRESS	3205 MARSHALL DR.	
20 CITY ST ZIP	MELBOURNE FL	
21 TITLE	D	☐ Change ☐ Addition
22 NAME	KARIA, CHANDRA M.	
23 STREET ADDRESS	3205 MARSHALL DR.	
24 CITY ST ZIP	MELBOURNE FL	

14. I do hereby certify that the information supplied with this filing is true and accurate and that my signature shall serve 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 1, or Block 11 if changed, or on an attachment with an address.

SIGNATURE: M. L. SHAH, President 5-1-95 (407) 728-1957

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone

0074306 CF