


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 05, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # J39791**

1. Entity Name  
 VISIONS CONSTRUCTION CORP.



Principal Place of Business 1255 S MILITARY TRAIL SUITE 200 DEERFIELD BEACH, FL 33442 US	Mailing Address 1255 S MILITARY TRAIL SUITE 200 DEERFIELD BEACH, FL 33442 US
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**DO NOT WRITE IN THIS SPACE**



04182008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2737160	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALDMAN, ANA MARIA ROIG  
 1255 S MILITARY TRAIL  
 SUITE 200  
 DEERFIELD BEACH, FL 33442

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reconstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	000000947717 06/02/08-80027-004 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WALDMAN, ANA MARIA ROIG 1255 S MILITARY TRL STE 200 DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WALDMAN, ANDREW C. 1255 S MILITARY TRL STE 200 DEERFIELD BEACH, FL 33442
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ana Maria Waldman Ana Maria Waldman 4/24/08 (954) 426-2600  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #