

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K19080** (6)  
1. Corporation Name  
**AMERICA VISION, INC.**



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
100 N BISCAYNE BLVD SUITE 604 MIAMI FL 33132		100 N BISCAYNE BLVD SUITE 604 MIAMI FL 33132		03/25/1988	05/01/1995
21. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For		
21	26	65-0052997	Not Applicable		
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
22	27	<input type="checkbox"/>			
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
23	28	<input type="checkbox"/>			
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
24	25	29	30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
PERERA, MERCEDES L. C/O BAROUH, PERERA & ASSOCIATES 48 E. FLAGLER ST., STE. 368 MIAMI FL 33131		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 Sections 607.0602 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 \_\_\_\_\_ DATE \_\_\_\_\_  
(Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIERA VICENTE	12 NAME	
STREET ADDRESS	VENTURA RODRIGUEZ 24	13 STREET ADDRESS	
CITY - ST - ZIP	MADRID, SPAIN	14 CITY - ST - ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHONCHOL, MIRIAM	2.2 NAME	
STREET ADDRESS	100 N BISCAYNE BLVD	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOSSA, CARLOS R.	3.2 NAME	
STREET ADDRESS	SUIPACHA 548	3.3 STREET ADDRESS	
CITY - ST - ZIP	BUENOS AIRES, ARGENT.	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARGUL, DAMIAN	4.2 NAME	
STREET ADDRESS	RIO BRANCO 1373	4.3 STREET ADDRESS	
CITY - ST - ZIP	MONTEVIDEO, URUGUAY	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: \_\_\_\_\_ DATE: 2/12/96  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
305-371-8057 Daytime Phone #

CR2E034 (12/95)