

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004795

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** GROUP VISION MARIEN, INC.

**Current Principal Place of Business:**

864 NE 90TH ST.  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

864 NE 90TH ST.  
MIAMI, FL 33138

**New Mailing Address:**

**FEI Number:** 30-0258301

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOSEPH, ANCELEAU  
864 NE 90TH ST.  
MIAMI, FL 33138 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOSEPH, ANCELEAU  
Address: 864 NE 90TH ST.  
City-St-Zip: MIAMI, FL 33138

Title: VD  
Name: JACQUES, SOREL  
Address: 11040 NE 6TH AVENUE  
City-St-Zip: MIAMI, FL 33161

Title: VD  
Name: SAINT-JEAN, GILBERT  
Address: P. O. BOX 640967  
City-St-Zip: MIAMI, FL 33164

Title: SD  
Name: LUCAS, VERDIEU  
Address: 650 SW 94 TERRACE  
City-St-Zip: PEMBROKE PINE, FL 33025

Title: ASD  
Name: PHILIAS, ERIC  
Address: 16989 SW 94TH CT  
City-St-Zip: PALMETTO BAY, FL 33157

Title: TD  
Name: JOSEPH, APPOLON  
Address: 864 NE 90TH STREET  
City-St-Zip: MIAMI, FL 33138

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ANCELEAU JOSEPH

PD

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date