2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N32282

Entity Name: VISION FOREIGN TRADE ZONE, INC.

FILED Oct 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

VISION COUNCIL 43 N KROME AVE

HOMESTEAD, FL 33030 US

Current Mailing Address: New Mailing Address:

43 N KROME AVE

HOMESTEAD, FL 33030 US

FEI Number: 65-0147716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ANDERSON, ROBERT
43 N. KROME AVENUE
2ND FLOOR
RICHARDSON, MICHAEL E
43 N. KROME AVENUE
2ND FLOOR
2ND FLOOR

HOMESTEAD, FL 33030 US HOMESTEAD, FL 33030 US

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: MICHAEL E. RICHARDSON 10/19/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DC () Delete
 Title:
 DP (X) Change () Addition

 Name:
 ANDERSON, ROBERT
 Name:
 RICHARDSON, MICHAEL E

 Address:
 43 N. KROME AVE
 Address:
 43 N. KROME AVE

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 HOMESTEAD, FL 33030

Title: DV () Delete Title: DC (X) Change () Addition

 Name:
 WEISMAN, JERRY
 Name:
 WEISMAN, JERRY

 Address:
 PO BOX 900400
 Address:
 PO BOX 900400

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: DT () Delete Title: () Change () Addition

 Name:
 BLAKE, PETE
 Name:

 Address:
 30401 S DIXIE HWY
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E. RICHARDSON DP 10/19/2004