## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## May 03, 2006 8:00 am Secretary of State DOCUMENT # N99000001253 1. Entity Name 05-03-2006 90195 038 \*\*\*\*70.00 VISION 2004, INC. Principal Place of Business Mailing Address 7750 N.W. 7TH AVENUE 7750 N.W. 7TH AVENUE MIAMI FL MIAMI FL 2. Principal Place of Business 770 N.W Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/05) City & State 4. FEI Number Applied For 65-0913695 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33110 Fee Required 6. Name and Address of Current Registered Agen 7. Name and Address of New Registered Agent Name SAINVIL, VICTOR Street Address (P.O. Box Number is Not Acceptable) 7250 N.W. 7TH AVENUE **MIAMI FL 33150** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS'\$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE □ Delete TITLE ☐ Change SAINVIL. VICTOR NAME NAME 7750 N.W. 7TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE VPD ☐ Delete TITLE □ Addition TELFORT, LESLY NAME NAME 7750 N.W. 7TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-7IP CITY-ST-ZIP SD Delete TITLE TITLE BELIZAIRE, SERGE NAME NAME STREET ADDRESS 7750 N.W. 7TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME SAINVIL, JACQUES STREET ADDRESS 7750 N.W. 7TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ΔTD Delete TITLE EMMANUEL, LOUIS NAME NAME 7750 N.W. 7TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE THIF GEFFRARD, LUNIQUE NAME NAME 7750 N.W. 7TH AVENUE STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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.

**NATURE:** 

Victor SAINVIL

FILED