## 2001 UNIFORM BUSINESS REPORT (UBR) Apr 17, 2001 8:00 am Secretary of State DOCUMENT # P0000033967 1. Entity Name TRUVISION INVESTMENT GROUP, INC. 04-17-2001 90125 040 \*\*\*150.00 Principal Place of Business Mailing Address 2755 E OAKLAND PARK BLVD., SUITE 101 2755 E OAKLAND PARK BLVD., SUITE 101 FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306 2. Principal Place of Business 165 E. Oakland Park Blog DO NOT WRITE IN THIS SPACE City & State Applied For Laudordak 65-0995830 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) LANE, PAUL J 2755 E OAKLAND PARK BLVD., SUITE 101 2755 E. Oukland Park Blud. Suite 303 City FT. Lauderdale FL Zip Gode 306 FT LAUDERDALE FL 33306 8. The above named entity subplits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change Delete TITLE TITLE SADRIWALLA, ABBAS A 2755 E. OAKLAND PARK BIVD. SUITE 303 NAME NAME LANE, PAUL J STREET ADDRESS STREET ADDRESS 2455 E OAKLAND PARK BLVD., SUITE 101 T. LAUDEDATE, Fr. 33306 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33306 ☐ Delete TIT! E TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Delete ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE □ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.