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FILED
Aug 16, 2001 8:00 am
Secretary of State
05-23-2001 91181 047 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000006 5360

1. Entity Name
VISUAL TECH, INC

Principal Place of Business
19017 Birch Rd
FORT Myers, FL 33912

Mailing Address

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4001 S. Ocean Dr. 1	4001 S. Ocean Dr. # [redacted]
Suite, Apt. #, etc. 11K	Suite, Apt. #, etc. 11K
City & State Hollywood FL	City & State Hollywood FL 33019
Zip 33019 Country USA	Zip 33019 Country USA

4. FEI Number 65-102 1805 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Spiegel & Utrera, P.A.,
343 Almeria Ave
Coral Gables, FL 33134

7. Name and Address of New Registered Agent

Name Renee Granger
Street Address (P.O. Box Number is Not Acceptable) 4001 S. Ocean Dr. # 11K
City Hollywood FL Zip Code 33019

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.

SIGNATURE Renee Granger RENEE GRANGER July 15/01
(Signature, typed or printed name of registered agent and title if applicable.) DATE (Required Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS $130.00 If After MAY 31 2001 Fee will be $550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD IVAN A Arroyo Blanco 19017 Birch Road Fort Myers, FL 33912	☒ Delete	PTD Renee Granger 4001 S. Ocean Dr, #11K Hollywood FL 33019	☒ Change ☐ Addition
TITLE S / NAME / STREET ADDRESS / CITY-ST-ZIP	Pablo C. Granger 19017 Birch Road Fort Myers, FL 33912	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (11/00)

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.

SIGNATURE: Renee Granger RENEE GRANGER June 15/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date