

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091214

Entity Name: VIS SALES, INC.

FILED
Mar 17, 2004
Secretary of State

Current Principal Place of Business:

10069 N FLORIDA AVE, STE B-8
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

846 N CLEVELAND MASSILLON
AKRON, OH 44332166

New Mailing Address:

FEI Number: 59-3672782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEST, JOHN W III
240 S PINEAPPLE AVE, 10TH FLOOR
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEORGE OFF, THOMAS R
Address: 46 ROBINSON BLVD, #929
City-St-Zip: ORLANDO, FL 32802

Title: D () Delete
Name: EVERS MAN, ERICA L
Address: 846 N CLEVELAND-MASSILLON
City-St-Zip: AKRON, OH 44333 21

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: EVERS MAN, ERICA L
Address: 846 N CLEVELAND-MASSILLON
City-St-Zip: AKRON, OH 443332166

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

SIGNATURE: ERICA L. EVERS MAN

VP

03/17/2004

Electronic Signature of Signing Officer or Director

Date