

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000098907

Entity Name: FRACTAL VISION, INC.

FILED  
Feb 24, 2003  
Secretary of State

## Current Principal Place of Business:

915 NW 1ST AVENUE  
SUITE H2403  
MIAMI, FL 33136

## New Principal Place of Business:

## Current Mailing Address:

915 NW 1ST AVENUE  
SUITE H2403  
MIAMI, FL 33136

## New Mailing Address:

FEI Number: 65-1050977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALDERRAMA, TULIA P MRS  
4435 79ST STREET  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

VALDERRAMA, TULIA P MRS  
915 NW 1ST AVENUE  
SUITE H2403  
MIAMI, FL 33136 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: PATRICIA VALDERRAMA

02/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVS ( ) Delete  
Name: VALDERRAMA, TULIA P  
Address: 1435 71ST ST  
City-St-Zip: MIAMI BEACH, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVS (X) Change ( ) Addition  
Name: VALDERRAMA, TULIA P  
Address: 915 NW 1ST AVENUE SUITE H2403  
City-St-Zip: MIAMI, FL 33136 US

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: PATRICIA VALDERRAMA

PRES

02/24/2003

Electronic Signature of Signing Officer or Director

Date