2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111644

Entity Name: GRACE VISION PUBLISHERS INC.

FILED May 26, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	WARD DR. RINGS, FL 331	166			
Current Mailing Address:			New Mailing Address:		
P. O. BOX MIAMI SPF	1077 RINGS, FL 332	266			
FEI Number:	65-0470990	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
MIAMI SPF	WARD DR. RINGS, FL 331				
	named entity s of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	nic Signature of Registered A	gent	Date	
		3(2)(b), F.S., the corporation did i	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCEO () BOBBY, AUSTII 231 WESTWAF MIAMI, FL 331	RD DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () JACOB, AUSTIN 231 WESTWAR MIAMI, FL 331	RD DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () HILLARY, AUST 231 WESTWAR MIAMI, FL 331	RD DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () JORDAN, AUST 231 WESTWAR MIAMI, FL 331	RD DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BOBBY AUSTIN PCE 05/26/2005