2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000044676

Entity Name: VISION SANTE INC.

Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2911 S.E. EAGLE DRIVE PORT SAINT LUCIE, FL 34984 **Current Mailing Address: New Mailing Address:** 2911 S.E. EAGLE DRIVE PORT SAINT LUCIE, FL 34984 FEI Number: 06-1615916 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, COLIN A 2911 S.E. EAGLE DRIVE PORT SAINT LUCIE, FL 34984 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition PINLAC, JOSE COLIN, ALLEN Name: Name: 4475 RIVER PINES COURT 2911 SE EAGLE DR Address: Address:

City-St-Zip: PORT SAINT LUCIE, FL 34984

City-St-Zip: TEQUESTA, FL 33469

Title:

Title: () Change () Addition

() Delete ALLEN, COLIN

Name: Address: City-St-Zip:

Name: 2911 SE EAGLE DRIVE Address: PORT SAINT LUCIE, FL 34984 City-St-Zip:

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 Statutés. 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: COLIN ALLEN 04/30/2003 D