2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like

SIGNATURE:

Sep 16, 2002 8:00 am Secretary of State P01000073931 **DOCUMENT#** 1. Entity Name INSIGHT VISION PLAN, INC. 09-16-2002 90092 011 ***158.75 Mailing Address Principal Place of Business 285 W 74 PLACE BN1200220 285 W 74 PLACE HIALEAH FL 33014 HIALEAH FL 33014 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CLAYTON, DAMA A Street Address (P.O. Box Number is Not Acceptable) ONE SE THIRD AVE 28 FL **MIAMI FL 33131** Zio Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's grature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. ☐ Change ☐ Addition resident ☐ Delete TITLE TITLE NAME ROBERT MESSA NAME STREET ADDRESS STREET ADDRESS Isalash FC 33014 CITY-ST-ZiP CITY-ST-ZIP Addition Change Delete TITLE MAME Jeffry Martin MAME 74 Place STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Operating Officer Delete Addition-· Change TITLE TITLE Quentel NAME West 94 Place STREET ACCRESS STREET ADDRESS FL 33614 CITY-ST-ZIP CITY-ST-ZIP Financial Office ☐ Addition Change | TITLE ☐ Delete TITLE David Dunbar Wost STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIAleah Change Addition Delete TITI F NAME : STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change 🔲 Addition TITLE TITLE Delete NAME HAME 4 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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 eath; 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.

FILED

AHachert \$\po1000073936

INSIGHT VISION PLAN INC

September 13, 2002

Florida Dept of State
Division of Corporations
P.O. Box 1500
Tallahassee, Fl 32302-1500

Re: 2002 Uniform Business Report

Dear Sirs:

This is the first year of business for this company and we did not receive the Report in January advising us of the May 15, 2002 due date.

Please take this into consideration in accepting our payment for 2002.

Ed Rodriguez

Accts Payable Supervisor

Junuary advention of the Asia year and the same