

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000131993

FILED  
Jan 28, 2004  
Secretary of State

Entity Name: NETVISION NETWORKS, INC.

## Current Principal Place of Business:

102 KATRINA CIR  
W PALM BCH, FL 33415

## New Principal Place of Business:

602 HERON DRIVE  
DELRAY BEACH, FL 33444

## Current Mailing Address:

102 KATRINA CIR  
W PALM BCH, FL 33415

## New Mailing Address:

602 HERON DRIVE  
DELRAY BEACH, FL 33444

FEI Number: 02-0660318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEAVITT, DONALD  
102 KATRINA CIR  
W PALM BCH, FL 33415

## Name and Address of New Registered Agent:

LEAVITT, DONALD  
602 HERON DRIVE  
DELRAY BEACH, FL 33444

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:

01/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WILLIAMS, TARA  
Address: 102 KATRINA CIR  
City-St-Zip: W PALM BCH, FL 33415

Title: DVS ( ) Delete  
Name: LEAVITT, DONALD  
Address: 102 KATRINA CIR  
City-St-Zip: W PALM BCH, FL 33415

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: WILLIAMS, TARA  
Address: 602 HERON DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: DVS (X) Change ( ) Addition  
Name: LEAVITT, DONALD  
Address: 602 HERON DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444

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: DONALD LEAVITT

DVS

01/28/2004

Electronic Signature of Signing Officer or Director

Date