## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P03000014978

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

Entity Name: 3 VISIONS INVESTMENT GROUP INC.

FILED Jul 04, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
433 LAKE NED RD. WINTER HEAVEN, FL 33884		619 LAKE NED RD. WINTER HAVEN, FL 33884	
Current Mailing Address:		New Mailing Address:	
433 LAKE NED RD. WINTER HEAVEN, FL 33884		619 LAKE NED RD. WINTER HAVEN, FL 33884	
FEI Number: 42-1575460 FEI Number Applied For ( ) FEI Number Not Applicable ( )			icable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
GARCIA, JOSE A 433 LAKE NED RD. WINTER HEAVEN, FL 33884 US		GARCIA, JOSE A 619 LAKE NED RD. WINTER HAVEN, FL 33884 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:			07/04/2005
OFFICERS	Electronic Signature of Registered Agent  AND DIRECTORS:	ADDITION	Date   S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P/T () Delete GARCIA, JOSE A 433 LAKE NET ROAD WINTER HAVEN, FL 33884	Title: Name: Address: City-St-Zip:	P/T (X) Change ( ) Addition GARCIA, JOSE A 619 LAKE NED ROAD WINTER HAVEN, FL 33884
Title: Name: Address: City-St-Zip:	VP/S () Delete GARCIA, ELVIRA 433 LAKE NET ROAD WINTER HAVEN, FL 33884	Title: Name: Address: City-St-Zip:	VP/S (X) Change ( ) Addition GARCIA, ELVIRA 619 LAKE NED ROAD WINTER HAVEN, FL 33884
Title: Name: Address: City-St-Zip:	D () Delete SERRAT, RENE 550 EAST MINNEHAHA AVE CLERMONT, FL 34711	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete GARCIA, JONGE 13327 PINYON DR CLERMONT, FL 34711	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BRITO, ALEJANDRO P.O. BOX 3402 HAINES CITY, FL 33845

ALTAMONTE SPRINGS, FL 32781 City-St-Zip: 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 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.

Title:

Name:

Name:

Address:

Address:

City-St-Zip: Title:

SIGNATURE: JOSE A. GARCIA P/T 07/04/2005

( ) Delete

() Delete

HERNANDEZ, ANGEL RAMON

5214 NORTH ORANGE AVE

WINTER PARK, FL 32792

() Change () Addition

( ) Change (X) Addition

VALDEZ, DANIEL

186 HATTAWAY DRIVE