## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000131774

Entity Name: DIASPO VISION, INC.

FILED Apr 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

927 S GOLDWYN AVE ORLANDO, FL 32805

**New Mailing Address: Current Mailing Address:** 

927 S GOLDWYN AVE ORLANDO, FL 32805

FEI Number: 20-1639506 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ESTIME, BENOIT ESTIME, BENOIT 7632 REDWOOD COUNTRY RD 7632 REDWOOD COUNTRY RD ORLANDO, FL 32805 ORLANDO, FL 32835 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: BENOIT ESTIME 04/09/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address: City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ADV ( ) Delete Title: (X) Change ( ) Addition NAU, EMMANUEL L DR Name: Name: NAU, EMMANUEL L DR 606 S TAMPA AVE 1339 ARLINGTON ST Address: Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32805

Title: DIR Title: () Delete (X) Change ( ) Addition Name: ESTIME, BENOIT Name: ESTIME, BENOIT

7632 REDWOOD COUNTRY RD 7632 REDWOOD COUNTRY RD Address: Address: ORLANDO, FL 32805 ORLANDO, FL 32835 City-St-Zip: City-St-Zip:

Title: Title: CDIR () Delete () Change () Addition CHARLOT, FRANCK Name:

Name: 1081 S HIAWASSEE RD, #714 Address: ORLANDO, FL 32835 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BENOIT ESTIME 04/09/2008 DIR