

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080869

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** INVISION DESIGN & DEVELOPMENT, CORP.

**Current Principal Place of Business:**

420 WEST PLATT STREET  
TAMPA, FL 33606

**New Principal Place of Business:**

307 S BOULEVARD, SUITE A  
TAMPA, FL 33606

**Current Mailing Address:**

P.O. BOX 153001  
TAMPA, FL 33684

**New Mailing Address:**

**FEI Number:** 20-3021408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANCHEZ LAW OFFICES, P.A.  
114 S. FREMONT AVE.  
TAMPA, FL 33606 US

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

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:**

Title: EVP ( ) Delete  
Name: BENAVIDES, OSCAR J  
Address: P.O. BOX 153001  
City-St-Zip: TAMPA, FL 33684

Title: EVP ( ) Delete  
Name: TORBAY, KARL  
Address: P.O. BOX 153001  
City-St-Zip: TAMPA, FL 33684

Title: T ( ) Delete  
Name: ALONSO, RAFAEL  
Address: 420 WEST PLATT STREET  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: ALONSO, RAFAEL  
Address: 307 S BOULEVARD, SUITE A  
City-St-Zip: TAMPA, FL 33606

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:** OSCAR J. BENAVIDES

EVP

04/27/2008

Electronic Signature of Signing Officer or Director

Date