

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000064960

**FILED**  
**Apr 10, 2011**  
**Secretary of State**

**Entity Name:** INVISION ENTERPRISES, INC.

**Current Principal Place of Business:**

426 SW CRABAPPLE COVE  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

426 SW CRABAPPLE COVE  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

**FEI Number:** 80-0452819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFFMEIER ACCOUNTING & TAX SERVICE, INC  
1925 S. PERIMETER ROAD  
SUITE 125  
FORT LAUDERDALE, FL 33309 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** HARPER, MARK R  
**Address:** 426 SW CRABAPPLE COVE  
**City-St-Zip:** PORT ST. LUCIE, FL 34986

**Title:** VP  
**Name:** EGUILIOR, RODOLFO  
**Address:** 1229 PALERMO AVE  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** VP  
**Name:** D'AMATO, LUCIANO  
**Address:** 7481 SW 42ND CT.  
**City-St-Zip:** DAVIE, FL 33314

I hereby 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 all other like empowered.

**SIGNATURE:** MARK HARPER

PRES

04/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date