

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90282 023 ***150.00

DOCUMENT # P40827

1. Entity Name

BLOCK VISION, INC.



Principal Place of Business

120 W FAYETTE ST #700
BALTIMORE MD 21201-3741
US

Mailing Address

120 W FAYETTE ST #700
BALTIMORE MD 21201-3741
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

14011370



MOORE CR2E034 (11/03)

4. FEI Number 22-2512930

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

WEINSTEIN, AUDREY
6700 NW BROKEN SOUND PKWY
#202
BOCA RATON FL 33487

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VPS	<input type="checkbox"/> Delete
NAME	WEINSTEIN, AUDREY M	
STREET ADDRESS	621 NW 53 STREET	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ALCORN, ANDREW	
STREET ADDRESS	621 NW 53RD ST	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CRAMMOND, STEPHANIE	
STREET ADDRESS	120 W. FAYETTE ST #700	
CITY-ST-ZIP	BALTIMORE MD 21201	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LEVIN, HOWARD	
STREET ADDRESS	120 W. FAYETTE ST #700	
CITY-ST-ZIP	BALTIMORE MD 21201	
TITLE	VPT	<input type="checkbox"/> Delete
NAME	VISCUSO, ERNEST	
STREET ADDRESS	120 W. FAYETTE ST #700	
CITY-ST-ZIP	BALTIMORE MD 21201	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Audrey Weinstein, Audrey Weinstein, SVP & Secretary 4/26/04 877-730-2747