

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 22, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P93000000848

1. Entity Name  
ADVISION ENTERPRISES, INC.



Principal Place of Business  
505 S FLAGLER DR  
SUITE 1325  
WEST PALM BEACH, FL 33401 US

Mailing Address  
505 S FLAGLER DR  
SUITE 1325  
WEST PALM BEACH, FL 33401 US



03082004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0393053

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

EISSEY, E M  
505 S FLAGLER DR  
SUITE 1325  
WEST PALM BEACH, FL 33401

**DO NOT WRITE  
IN THIS SPACE**

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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

U00000033134  
03/22/04-80006-004 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	EISSEY, E MICHAEL J
STREET ADDRESS	660 LAKESIDE DRIVE
CITY - ST - ZIP	NORTH PALM BEACH, FL 33408
TITLE	VP
NAME	KIESZKOWSKI, VIRGINIA
STREET ADDRESS	911 9TH COURT
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:

*E. Michael Eissey, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. Michael Eissey, Jr.

03/19/04

Date

561-655-5337