FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

STE 212

370 W CAMINO GDNS BLVD

BOCA RATON FL 33432

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 29 1998 8:00am

Secretary of State

521- 391-120V

1/10/98

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1993

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300008400 (2)

DATAVISION USA INC.

Principal Place of Business

370 W CAMINO ODNS BLVD.

BOCA RATON FL 33432

STE 212

2. Principal Place of Business	A Adams Adams			UE/UU/ 1880		7		
730-1 0 1	- 1 4 - 1			4. FEI Number		AF	plied For	
21 3375 N. DIXIE HWY				<i>€ 1√∞y</i> 65-0388618			Not Applicable	
Sulte, Apt. #, etc. 22 # 5	5 27 # 5			5. Certificate of Status Desired	_ \$	8.75 Fee Re	Additional equired	
City & State				6. Election Campaign Financing		\$5.00	May Be	
23 130 CA RATON FC	a RATON FC 28 BOCA RATON,			Trust Fund Contribution Added to Fee				
Zip Country	Zip	Country		8. This corporation owes or has pa	id the current	year Int	angible	
			SA	Personal Property Tax due June	_] No	
g. Name and Address of Current Registered Agent				10. Name and Address of New Re	gistered Age	nt		
CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST. TALLAHASSEE FL 32301			Name				. .	
			82 Street Address (P.O. Box Number is Not Acceptable)					
			Siredi Address (1.0. Box Number is Not Acceptable)					
			83					
					<u>.</u>			
		84	City		FL 8	5 Zip (Code	
11. Pursuant to the provisions of Sections 607,0502 at	nd 607 1508. Florida Statutes	the above	-named coro	oration submits this statement for the n	urpasa of obs	naina it	rogistored	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent an	d title if applicable (MOTE)	Conistant Anna	d a small us san de	od when reinstating)	DATE			
12. OFFICERS AND D		13.	ii signature require	ADDITIONS/CHANGES TO OFFIC		ECTOR	C IAI 12	
TITLE D	DELETE	1,1 TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME OBEID, RITA		1.2 NAME				Change	☐ MOUNTON	
STREET ADDRESS 21088 VERDE TRAIL								
	BOOK DATON EL COMO		ADDRESS					
CITY-ST-ZIP BUCA HATON FL 33433	DELETE	1.4 CITY - ST	- ZIP					
	☐ DELETE	2.1 TITLE			لسا	Change	Addition	
NAME		22 NAME						
STREET ADDRESS		2.3 STREET A	ADDRESS					
CITY-ST-ZIP	2.40		-ZIP					
TITLE	DELETE 3.1 TO		-		·	Change	Addition	
NAME	3.2 NA							
STREET ADDRESS		3.3 STREET A	ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST	- ZIP					
TITLE	☐ DELETE	4.1 TITLE				Change	Addition	
NAME		4. 2 NAME						
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CITY-ST-ZIP		4.4 C(TY - ST-	- ZIP					
TITLE	DELETE	5.1 TITLE				Change	Addition	
NAME .		5.2 NAME	İ		_	٠		
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CITY-ST-ZIP		5.4 CITY-ST-						
TITLE	☐ DELETE	6.1 TIFLE	LIF		П	Change	Addition	
NAME		6.2 NAME			limit (znango	LI NAMED I	
STREET ADDRESS			DDDCCC					
		6.3 STREET A						
CITY-ST-ZIP	is filing dose not qualify for t	6.4 CITY+ST-	ZIP	Continu 110 07/2/01 Florido De La 17/2		la a a la constantina		
14. 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 annual report or supplemental annual 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								