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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000081823 (5) MANAGEMENT VISIONS, INC.	
Principal Place of Business Mailing Address 2560 N. ATLANTIC AVENUE C/O CLARK & STEWART. CPA'S DAYTONA BEACH FL 32118 S35 SILVER BEACH AVENUE DAYTONA BEACH FL 32118 DO NOT WRI	TE IN THIS SPACE
3. Date Incorporated or Qualified 11/30/1993	d
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 59-3263235 Suite, Apt. #, etc. Suite, Apt. #, etc.	Not Applicable
Suite, Apr. #, etc. 5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State City & State 6, Election Campaign Financing	
28 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or has 25 29 30 Personal Property Tax due Jur	
28 29 30 Felsonia Property 12x due out	
ANDERSON, GEORGE D 81 Name	
3010 SOUTH PENINSULA DR. 82 Street Address (P.O. Box Number is Not Accept	table)
DAYTONA BEACH FL 32118	
03	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	e purpose of changing its registered cept the appointment as registered
SIGNATURE	
Signature, typed or printed harrie of requisitined agent and title 4 applicable (NOTE: Registered Agent signature required when reinstating)	DATE FICERS AND DIRECTORS IN 12
Signature, typed or printed harrie of requisitined agent and title 4 applicable (NOTE: Registered Agent signature required when reinstating)	DATE FICERS AND DIRECTORS IN 12 Change Addition
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14. Thereby 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 Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

CICNATUDE.

STREET ADDRESS

Liver O anduren

4/28/78

RE034 (10/97)

FILED

May 07 1998 8:00am

Secretary of State