

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 12 1997 8:00am  
Secretary of State

DOCUMENT # P94000009961 (1)

1. Corporation Name  
VICON INTERNATIONAL CORP.



Principal Place of Business  
800 N FEDERAL HIGHWAY, #280  
BOCA RATON FL 33432  
US

Mailing Address  
800 N FEDERAL HWY  
280  
BOCA RATON FL 33432-2753  
US

2. Principal Place of Business  
21 Sub City 22 1020 NW 6th St, Bldg H&I  
Deerfield Beach, FL 33442  
23 Zip 24 Country 25  
2a. Mailing Address  
26 Sub City 27 1020 NW 6th St, Bldg H&I  
Deerfield Beach, FL 33442  
28 Zip 29 Country 30

3. Date Incorporated or Qualified 01/31/1994  
3a. Date of Last Report 05/01/1996  
4. FEI Number 65-0467459  
Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

COLANGELO, STEVEE JR  
2424 N. FEDERAL HWY STE 250  
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name STEPHEN M. GOODMAN  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 1020 NW 6th St, Bldg H&I  
84 City Deerfield Beach, FL 33442  
85 Zip Code FL

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 Stephen M. Goodman Stephen M. Goodman 4/30/97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	COLANGELO, VINCENT	2424 N. FEDERAL HWY #250	BOCA RATON FL 33431	<input checked="" type="checkbox"/>
V	COLANGELO, STEPHEN A	2424 N. FEDERAL HWY #250	BOCA RATON FL 33431	<input type="checkbox"/>
S	MANCUSO, JOY	2424 N. FEDERAL HWY #250	BOCA RATON FL 33431	<input type="checkbox"/>
T	TALLMAN, LYNN A	2424 N. FEDERAL HWY #250	BOCA RATON FL 33431	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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 no 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

RE:

4/30/97 1-800-984-2660

CR2E034 (9/96)