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

DOCUMENT # P94000015546 (2)

VISITOUR MEDIA, INC.

Principal Place of Business Mailing Address

12618 CHELMSFORD COURT
ORLANDO FL 32637

Mailing Address

12618 CHELMSFORD COURT
ORLANDO FL 32637-6541

FILED Jul 01 1997 8:00am Secretary of State



ORLANDO FL S	12837	ORLANDO FL 32837-8541	ORLANDO FL 32837-6541					
					3. Date Incorporated or Qualified 02/18/1994	3a. Date of Last Report 05/01/1996		
	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied	
21		26			59-3227143		Not App	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 Addition Fee Require	
22 City & State		City & State			A Florida Comunica Financia		-	
23	U	28			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Added to Fee	
Zip	Country	Z _I p	Country	,	8. This corporation has liability for i			
24	25	29	30]Yes □ N		
	9. Name and Address of	of Current Registered Agent			10. Name and Address of New Re	gistered Age	nt	
HEIS	SEY, JEFFREY W		81	Name				
12618 CHELMSFORD COURT				Street Add	ress (P.O. Box Number is Not Acceptable	ole)		
ORL	ANDO FL 32837							
			83					
			84	City		FL ⁸	5 Zip Code	
44 0		s 607.0502 and 607.1508, Florida Statutes	o the should	0 000000 004	position submits this statement for the n	virocco of ob	paina ite ree	iclored
office or r agent. I a	egi ste red agent, or both, in marker with, and accept	the State of Florida. Such change was authenormal statutes. the obligations of, Section 607.0505, Flor	uthorized b ida Statute	y the corpora s.	tion's board of directors. I hereby accep	of the appoint	ment as regis	tered
SIGNATURE						DATE		
12,	Signature, typed or printed name of re	egistered agent and title if applicable (NOTE: CERS AND DIRECTORS	Hegislered Ag	ent signature requ	ited when reinstating) ADDITIONS/CHANGES TO OFFICE		RECTORS IN	12
TOLE	D	DELETE	1.1 TITLE					Addition
NAME	HEISEY, JEFFREY W	_	1.2 NAME					
STREET ADDRESS	12618 CHELMSFORD	COURT	1.3 STREE	ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32837		14 CITY-:	ST - ZIP				
TITLE		☐ DELETE	2.1 TITLE				Change 🔲	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	FADORESS				
CITY-ST-ZIP		DELETE	2. 4 CITY-	ST - 7IF			Ohanaa 🗖	A AUDIO A A
TITLE		DELETE	3.1 TITLE			ليا	Change	Addition
NAME			3.2 NAME	4000000				
STREET ADDRESS			3.3 SIREF	I ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	31-21			Change	Addition
NAME		_	4, 2 NAME				-	
STREET ADDRESS			4.3 STREE	I ADDRESS				
CITY-ST-ZIP			4.4 CHY-	ST - 7 IP				
TITLE		☐ DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 \$1REE	1 ADDRESS				
CITY-ST-ZIP			5.4 C/TY-	ST-ZIP		···	A	
TITLE		☐ DELETE	6 1 THTLE			L	Change 🔲	Addition
NAME			62 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	<u> </u>		6.4 CITY-	ST-ZIP				

14. I do 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 Block 12 or Block 13 if changed, or on an attachment with an address.

1-24-07

412 855 4132