

FILE NOW; FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Linda B. Norton
Secretary of State
OFFICE OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000069211 (8)

1. Corporation Name
TECHNOVISION, INC.

Principal Place of Business 1100 TECHNOLOGY PLACE #110 WEST PALM BEACH FL 33407	Mailing Address 1100 TECHNOLOGY PLACE #110 WEST PALM BEACH FL 33407
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DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 09/20/1994	3a. Date of Last Report
4. FBI Number 65-0634352	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 the Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State Apt. # etc. 22	State Apt. # etc. 27
City & State 23	City & State 28
ZIP 24	ZIP 29

9. Name and Address of Current Registered Agent BOLDT, MANFRED G 3769 CYPRESS LAKE DRIVE LAKE WORTH FL 33467	10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City FL B5 Zip Code
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11. Pursuant to the provisions of Section 607.01, 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. No 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 responsibility for the filing of this statement.

SIGNATURE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
NAME D BOLDT, MANFRED G	NAME ☐ Change ☐ Addition
STREET ADDRESS 3769 CYPRESS LAKE DRIVE	STREET ADDRESS ☐ Change ☐ Addition
CITY LAKE WORTH FL 33467	CITY ☐ Change ☐ Addition
NAME	NAME ☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS ☐ Change ☐ Addition
CITY	CITY ☐ Change ☐ Addition
NAME	NAME ☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS ☐ Change ☐ Addition
CITY	CITY ☐ Change ☐ Addition
NAME	NAME ☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS ☐ Change ☐ Addition
CITY	CITY ☐ Change ☐ Addition
NAME	NAME ☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS ☐ Change ☐ Addition
CITY	CITY ☐ Change ☐ Addition

14. I, the undersigned, certify that the information reported with this report is voluntarily furnished and does not qualify for the exemption stated in Section 607.01, Florida Statutes. I further certify that the information was obtained from a financial report or supplemental annual report or from other sources 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 registered agent or person empowered by the corporation to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on another report or reports.

SIGNATURE: *Manfred G. Boldt*
MANFRED G. BOLDT
4/25/95 (407) 863-6308

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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
Tallahassee, Florida 32399-0001

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2005-1-11 3:54
TALLAHASSEE, FLORIDA

DOCUMENT # P94000069662 (2)

1. Corporation Name

T & T ADVENTURE LEASING, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **11864 BAY PLACE
BOCA RATON FL 33428**
Mailing Address: **11864 BAY PLACE
BOCA RATON FL 33428**

3. Date of Corporation or Qualification	3a. Date of Last Report
09/21/1994	
4. FEI Number	Applied For / Not Applicable
65-0522448	
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 § 199.032 Florida Statutes	
☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
State, Apt. #, etc.	State, Apt. #, etc.
22	27
City & State	City & State
23	28
Lat.	Lat.
24	29
Long.	Long.
25	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FILINGS INC. 3732 N.W. 16TH ST. FT. LAUDERDALE FL 33311	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83.
	84. City
	85. Zip Code
	FL

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3) 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 607.01(2) Florida Statutes.

SIGNATURE: _____ Date: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
Officer	D GREENTREE, TODD	Change ☐ Add ☒	President
Street Address	323 "D" STREET S.E.		Mark Mitchell
City & State	WASHINGTON DC 20003		330 SE 3 Ct.
			Pompano Beach, FL 33060
TITLE	NAME	TITLE	NAME
Officer		Change ☐ Add ☐	
Street Address			
City & State			
TITLE	NAME	TITLE	NAME
Officer		Change ☐ Add ☐	
Street Address			
City & State			
TITLE	NAME	TITLE	NAME
Officer		Change ☐ Add ☐	
Street Address			
City & State			
TITLE	NAME	TITLE	NAME
Officer		Change ☐ Add ☐	
Street Address			
City & State			

14. I, the undersigned, certify that the information supplied with this report is accurately furnished and of my best knowledge for the corporation stated in Sections 199.03(1) Florida Statutes. I further certify that the information is correct and that the corporation is in compliance with the provisions of the Florida Statutes 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 registered agent or authorized representative of the corporation as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 of this report or in the corporation's records.

SIGNATURE: Mark Mitchell
Mark Mitchell
4/29/95 303-438 3356