

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

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000006810 (2)**

1. Corporation Name:  
**LEGALVISION ENTERPRISES, INC.**

Principal Place of Business

~~13857 OSPREY LINKS RD  
#82  
ORLANDO FL 32837  
US~~

Mailing Address

~~P.O. BOX 3748  
ORLANDO FL 32802~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 <b>2115 Valencia Rd</b>		26 <b>2115 Valencia Rd</b>		01/26/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3298494	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 <b>Orlando, FL</b>		28 <b>Orlando, FL</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 <b>32803</b>		29 <b>32803</b>		30 <b>U.S.</b>	
Country		Country		10. Name and Address of New Registered Agent	
25 <b>U.S.</b>		30 <b>U.S.</b>		81 Name	
9. Name and Address of Current Registered Agent		82 Street Address (P.O. Box Number is Not Acceptable)		83	
<b>JACOBSON, MITCHELL</b>		<b>Darren Barr</b>		84	
<b>431 E. CENTRAL BLVD SUITE 715</b>		<b>2115 Valencia Rd.</b>		85	
<b>ORLANDO FL 32801</b>		<b>Orlando, FL</b>		86	

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 **Darren C. Barr** **5/15/98**  
Signature typed or printed name of registered agent or officer, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<b>P/S/T</b>
NAME	<b>BARR, DARREN</b>	1.2 NAME	<b>Barr, Darren</b>
STREET ADDRESS	<b>2115 VALENCIA RD</b>	1.3 STREET ADDRESS	<b>2115 Valencia Rd.</b>
CITY-ST-ZIP	<b>ORLANDO FL</b>	1.4 CITY-ST-ZIP	<b>Orlando, FL 32803</b>
TITLE	V	2.1 TITLE	<b>Richard Wright (last name)</b>
NAME	<del>JACOBSON, MITCHELL</del>	2.2 NAME	<b>1221 W. Colonial Dr., Suite 200</b>
STREET ADDRESS	<del>431 E. CENTRAL BLVD SUITE 715</del>	2.3 STREET ADDRESS	<b>Orlando, FL 32804</b>
CITY-ST-ZIP	<del>ORLANDO FL</del>	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	<del>JACOBSON, ROGER</del>	3.2 NAME	
STREET ADDRESS	<del>431 E. CENTRAL BLVD SUITE 715</del>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<del>ORLANDO FL</del>	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 a 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.

SIGNATURE **Darren C. Barr** **5/15/98**

CR2E034 (10/97)