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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000048696 (5)

INTERNATIONAL LASERVISION, INC.

	•									
Principal Place of Business Mailing Address							I DURIL DI DUI IDILE BILI	I II IIO D 114 (D0 1		
4000 N. FEDE SUITE 206 BOCA RATON		4000 N. FEDERAL HWY. SUITE 206 BOCA RATON FL 33431								
		DOWN HISTORY CO.			3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1995					
2. Principal Plac		2a. Mailing Address				4. FEI Number		Applied For		
	Lee Road	. 44	. 41.14				65-0592438		Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired	•	5 Additional	
22 # 3 5 0 City & State		27 # 3 5 0 City & State				6 Floring Committee Francisco		Required		
23 Winter Park, Florida		28 Winter Park, F			lorida		6. Election Campaign Financing Trust Fund Contribution		IO May Be ed to Fees	
Zip	Country	7 7 P		intry		ıa	8. This corporation has liability for inter			
24 32789	25 U S A	29 32789	·-		SA		Florida Statutes Yes		100.002,	
	9. Name and Address of Curren			[10. Name and Address of New Regi	stered Agent		
				81	Name					
WAHNER	, XAVIER J			82 Street Address (P.O. Box Number is Not Acceptable)						
	FEDERAL HWY.		0			361 Addiess (r. o. box Mainteer is not Acceptable)				
SUITE 20			1							
BOCA RA	ATON FL 33431							OE 7	in Codo	
				84	City			FL 85 Zip Code		
or registere familiar with	othe provisions of Sections 607.0502 diagent, or both, in the State of Floric , and accept the obligations of, Secti	fa. Such change was author	ized by the d	ove-r corp	named co oration's	orporal board	tion submits this statement for the purpos tof directors. I hereby accept the appointr	e of changing its ment as registered	registered office d agent. I am	
SIGNATURE	Ignature typed or ponted name of registered agent	and their a glicable (1)	VOTE: Registered	Agen	nt signature e	eaured v	when reinstalkig)	DATE	***************************************	
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICE		DRS IN 12	
TITLE	D	☐ DELETE	1.11	HLE				Change	Addition	
NAME	WAHNER, XAVIER J		1.2 NAME							
STREET ADDRESS	4000 N. FEDERAL HWY., #20)6	1.3 STREET ADDRESS		ADDRESS					
CHY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY - ST - ZII		ST-ZIP					
TITLE		☐ DELETE	2. 1 117		127			☐ Change	★ Addition	
NAME			2 2 N				TRICIA BRUMLIK			
STREET ADDRESS		235					99 Lee Road, #350			
CITY-ST-ZIP	M Andrian						nter Park, Florida			
TOTLE		DELETE					S/T	Change	Addition	
NAME							RRENCE R. HUSTON			
STREET ADDRESS							535 Sundance Lane			
CITY-S1-ZIP		E DELETE			11 - ZIP	BO	ca Raton, Florida	33428	The same of	
TITLE		DELETE	4 11					☐ Change	Addition	
NAME PERFET ADDOLOG			4.2 N		*******					
STREET ADDRESS	•				ADDRESS					
TITLE		DELETE	4.4 Cl		ST - ZIP			☐ Change	Addition	
NAME		[] 5561,1	52 NA		ļ			□ Orkings	L_I Madition	
STREET ADDRESS					ADDRESS					
CITY-S1-ZIP					AJUNESS ST-ZIP					
TITLE		["] DELETE	6 1 T		11.01			[] Change	☐ Addition	
NAME			62 N		ļ					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 C							
14. I do hereby certify that t	the information indicated on this annu	ial report or supplemental an	m shed and mual report i	doe s tru	s not qua	curate	r the exemption stated in Section 119.07(5 e and that my signature shall have the san report as required by Chapter 607, Florida	ne legal effect as i	f made under	

SIGNATURE: - CAMMUN A AND THE TERROR R. Huston 430.76 407-883-6249

SIGNATURE: Date OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Description of Printed Printe

CR2E034 (12/95)