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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000062044 (9)

1. Corporation Name

VFS - VISION FINANCIAL SERVICES CORPORATION

Principal Place of Business

680 WEST PARK DRIVE, SUITE 106
MIAMI FL 33172

Mailing Address

680 WEST PARK DRIVE, SUITE 106
MIAMI FL 33172-5327



3. Date Incorporated or Qualified
08/11/1995

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

21 155 South Miami Avenue

2a. Mailing Address

26 861 SW 135th Court

Suite, Apt. #, etc.

22 PH # 2

Suite, Apt. #, etc.

27

City & State

23 Miami Florida

City & State

28 Miami Florida

Zip

24 33130

Country

25 USA

Zip

29 33184

Country

30 DADE

9. Name and Address of Current Registered Agent

PRADO, MARIO ANTONIO
680 WEST PARK DRIVE, SUITE 106
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

MARIO ANTONIO PRADO

82 Street Address (P.O. Box Number is Not Acceptable)

861 SW 135th Court

83

84 City

Miami

FL

85 Zip Code

33184

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 to 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

Signature, typed or printed name of registered agent and Florida address

(NOTE: Registered Agent signature required when reinstating)

DATE

01-21-97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	PRADO, MARIO A	680 WEST PARK DRIVE, SUITE 106	MIAMI FL 33172	☐
TD	PRADO, TERESITA G	680 WEST PARK DRIVE, SUITE 106	MIAMI FL 33172	☒
SD	HARSHMAN, LEONORA	881 S.W. 135TH COURT	MIAMI FL 33184	☒
				☐
				☐
				☐

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	☒	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	☒	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	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.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

0233078

CR2E034 (9/96)