

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

FILED  
May 12 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 # P95000065442 (2)  
1. Corporation Name  
VICON INTERNATIONAL TELECOMMUNICATIONS CORP.



Principal Place of Business  
800 N. FEDERAL HIGHWAY, #460  
BOCA RATON FL 33432  
US

Mailing Address  
800 N. FEDERAL HIGHWAY, #460  
BOCA RATON FL 33432-2754  
US

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/24/1995		3a. Date of Last Report 05/01/1996	
21 St 22 1020 NW 6th St, Bldg H&I 23 Deerfield Beach, FL 33442		26 Suite Apt # etc. 27 1020 NW 6th St, Bldg H&I 28 Deerfield Beach, FL 33442		4. FEI Number 65-0651239		Applied For Not Applicable	
24 Zip 25 Country		29 Zip 30 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

GOODMAN, STEPHEN M  
900 N. FEDERAL HWY., SUITE 460  
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City 1020 NW 6th St, Bldg H&I  
Deerfield Beach, FL 33442  
85 Zip Code

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 Stephen M. Goodman Stephen M. Goodman 4/30/97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	COLANGELO, VINCENT	
STREET ADDRESS	79 EAST VIEW DR	
CITY-ST-ZIP	VALHALLA NY	
TITLE	V	DELETE
NAME	COLANGELO, STEPHEN	
STREET ADDRESS	4882 ROTHSCHILD DR	
CITY-ST-ZIP	CORAL SPRGS FL	
TITLE	S	DELETE
NAME	MANCUSO, JOY	
STREET ADDRESS	488 SE 11TH TERR	
CITY-ST-ZIP	DANIA FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	PD Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	
2.3 STREET ADDRESS	1020 NW 6th St, Bldg H&I
2.4 CITY-ST-ZIP	Deerfield Beach, FL 33442
3.1 TITLE	ST Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME	
3.3 STREET ADDRESS	1020 NW 6th St, Bldg H&I
3.4 CITY-ST-ZIP	Deerfield Beach, FL 33442
4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: Stephen M. Goodman

CR2E034 (9/96)