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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90118 012 ***150.00

1. 00, po, auc	MENT # P95000 IN Name VISUALS, INC.	084315			
Principal Plac	ce of Business	Mailing Address			<u> </u>
1 .		· ·			
3800 SOUTH CONGRESS AVENUE 3800 SOUTH CONGRESS AVENUE BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426				·	
	,.2 05,120	DOTATON DENOTITE 33420	•	DO NOT WRITE IN THIS	S SPACE
! -				3. Date Incorporated or Qualifed	
. •				11/02/1995	
2. Principal P	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		13-3858302	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
City & Stat	to	27		0. 000.000	Fee Required
23	te .	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	├ ─ `	30	This corporation owes the current year In Personal Property Tax.	itangibie ☐ Yes X No
	9. Name and Address of Current			10. Name and Address of New Registered	
CDA	MOTON FOWLOOD T		81 Name		
CRANSTON, EDWARD T				Address (P.O. Box Number is Not Acceptable)	w.u= -
3600 SOUTH CONGRESS AVENUE BOYNTON BEACH FL 33426			02 040007	Address (F.O. Box Humber is Not Acceptable)	
BUTNION DEACH FL 33426			83		
			84 City		85 Zip Code
				FL	_ 1 '
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				•	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			Registered Agent signature re		
TITLE	0	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	
NAME	CRANSTON, EDWARD T	LJ DELLIC	1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	934 SW 34TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY-ST-ZIP		ļ
TITLE	0	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BRITTON, RICHARD		2.2 NAME	*	
STREET ADDRESS	934 SW 34TH COURT		2.3 STREET ADDRESS	1	
CITY-ST-ZIP	BOYNTON BEACH FL		2.4 CITY-ST-ZIP		er francisco er
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP		
NAME		□ DECE IE	4.1 TITLE	•	☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME		İ
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		C
STREET ADDRESS			5.3 STREET ADDRESS		•
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
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 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, with all other like empowered process.

SIGNATURE: SANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WRICHARD H. BRITTON 2/2/99

Daytime Phone #

2F034 (11/98)