2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007
Secretary of State

DOCUMENT# P95000096815

Entity Name: VISUALS, INC.

Current Principal Place of Business:

2193 N POWERLINE RD
#1
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

10450 NW 49TH PLACE
CORAL SPRINGS, FL 33076 US

New Mailing Address:

FEI Number: 65-0631980 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHMOKLER, ROBERT
10450 NW 49TH PLACE
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ST ( ) Delete
Name: SHMOKLER, ROBERT
Address: 10450 NW 49TH PL
City-St-Zip: CORAL SPRINGS, FL 33076

Title: P ( ) Delete
Name: KIESERMAN, DEBRA
Address: 10450 NW 49TH PL
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT SHMOKLER ST 01/16/2007

Electronic Signature of Signing Officer or Director Date