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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600006616 (2) 1. Corporation Name VISIONARY MARKETING CONCEPTS, INC.

FILED Apr 30 1997 8:00am Secretary of State



Principal Place of Business 223 MARK TWAIN LANE ROTONDA WEST FL 33947		Mailing Address 223 MARK TWAIN LANE ROTONDA WEST FL 33947-2146) radicade sig desse acidi adell basid durit durit dolla diste difa elle iddi						
							3. Date Incorporated or Qu 01/22/1996	alified	3a . Da	te of Last	Report
2. Principal Pi	lace of Business	2a. Mailing Address 26				4. FEI Number 65-0646.	595	Applied For Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.									Additional
22		27					5. Certificate of Status Desi	ired			Required
City & State	9	City & St	ato			···	6. Election Campaign Final	ncing		\$5.00	May Be
23		28					Trust Fund Contribution				to Fees
Zip	Country	Ziμ		Count	try		8. This corporation has liab	ility for in	tangible	tax under	s. 199.032,
24	25	29	3	0			Florida Statules		·] No	
	9. Name and Address of Curre	nt Registered Age	ent				10. Name and Address of I	New Reg	istered A	Agent	
	S, RONALD G			8	31	Name					
	MARK TWAIN LANE			8	12	Street Addre	ess (P.O. Box Number is Not A	ccontabl	6)		
ROTO	ONDA WEST FL 33947			Ľ				ocropitati.	~,		
				8	3						
				8	4	City			FL	85 Zip	Code
11. Pursuant to	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Fe of Florida, Such o	lorida Statutes change was aut	, the abo horized	by t	named corp he corporati	oration submits this statement fon's board of directors. I hereb	or the pu y accept		changing pintment a	its registered s registered
SIGNATURE	Signature, typed or printed name of registeren ap										
12.		ID DIRECTORS	(NOTE: +	13.	Agent	signature require	id when reinstating) ADDITIONS/CHANGES TO) OFFIC	DATE EDG AND	DIDECTO	DO INLAD
TITLE	PD		DELETE	1110H			ADDITIONS/CHANGES TO	J OFFIC	EHS ANL	Change	
NAME	LEWIS, RONALD G	<u></u>		1.2 NAM						L Originge	
STREET ADDRESS	223 MARK TWAIN LANE			13 STRE		anaree					
CITY-ST-ZIP	ROTONDA WEST FL 33947			14 CITY							
TITLE	STD	Г	DELFTE	21 117(8		7r				Change	Addition
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STREET ADDRESS	223 MARK TWAIN LANE			23 STRE		nnotee					
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TITLE			DELETE	3111116		· tir				Change	Addition
NAME				3.2 NAMI						onongo	//۱۹۵۰(۱۵۱۱
STREET ADDRESS				3.3 STRE		nneess					
CITY-ST-ZIP				3.4. CITY							
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STREET ADDRESS				4.3 STRE		ODRESS					
CITY-ST-ZIP				4.4 CITY							
TITLE			DELETE	5.1 TIBLE						☐ Change	Addition
NAME		_		5.2 NAMI							
STREET ADDRESS				5.3 STRE		DDBESS					
CITY-ST-ZIP				5.4 CITY		1					
TITLE			DELETE	6.1 TITLE		C 31				Change	Addition
NAME		<u></u>	- · · · · · · · · · · · · · · · · · · ·	6.2 NAMI						- Johnnige	F. Madilion
STREET ADDRESS				I		ADDE GG					
				6.3 STHE							
CITY-ST-ZIP	ontife that the information of the	al (4)		6 4 CI1Y	- 51-	/l·	. 0 - 1 - 440 07/07/1	A			

non-nereby 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 13 if changed or on an attachment with an address.

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