## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

**FILED** AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 12 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P96000035006 (1) VISIONARY TECHNOLOGIES OF KENDALL, INC. Principal Place of Business Mailing Address 8306 MILLS DRIVE SUITE 147 8306 MILLS DRIVE SUITE 147 MIAMI FL 33183 MIAMI FL 33183 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 04/23/1996 2. Principal Place of Business Mailing Address Applied For 2a. Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
Yes
No 24 25 29 30 Personal Property Tax due June 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 2251 SW 22 STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33145 83 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Acdition 1.1 TITLE Change TITLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition THE 2.1 TITLE D-Director Change KARENOCKAUFMA 8000 S.W 120 ST NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS MIAM: FL 33156 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

62 NAME

DELETE

Annal GARLUM PROBLEMENT

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

alelon - 2010

Change

Addition