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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000047122 (2)

INVISION BUSINESS SOLUTIONS, INC.

Principal Place of Business			Mailing Address					i ddeli ae i die solle âthi êthii earl eer				
751 WARRENTON ROAD		70	751 WARRENTON ROAD									
WINTER PARK FL 32792			WINTER PARK FL 32792			i						
1							L	DO NOT WRITE	IN THIS S	3PACE		
1								3. Date Incorporated or Qualified				
5 552-16								06/04/1996				
	flace of Business	H===	Mailing Address					4. FEI Number		<u> </u>	1 -	ed For
21 Suite, Apt. #, etc.			6 Suite, Apt #, etc.					59-3385672		60.7		Applicable
22			٦ ' '					5. Certificate of Status Desired			'5 Ado Requ	
City & State			City & State					• Flastice Compoles Financias			- -	
23			28					Election Campaign Financing Trust Fund Contribution			00 Ma led to F	
Zip	Country	- 1501	Zip Countr					This corporation owes or has pa				
24	25	29	1					Personal Properly Tax due June	_	Yes		-
	9. Name and Address of Curren		tered Agent	1001	T		1	Io. Name and Address of New Re				
AM	IN, JACK				81	Name						
1 /	I WHISPER LAKE LANE STE E				82	Ctroot		(D.O. Day Nigeber is Net Assessed	le)			
WINTER PARK FL 32792						Street	Address	(P.O. Box Number is Not Acceptab	ile)			
	V/4,				83			***************************************				
					-							
-					B4	City			FL	85 2	Zip Coo	de l
11. Pursuant	to the provisions of Sections 607.050	2 and 60	07.1508, Florida Statu	tes, the	above	-namec	d corpora	tion submits this statement for the p	urpose of	changir	ng its re	egistered
office or r	egistered agent, or both, in the State m familiar with, and accept the obligation	of Floric Strons of	ta. Such change was Section 607 0505. F	authoriza Iorida Sta	ed by alutes	the cor	rporation's	's board of directors. I hereby accep	of the app	ointment	as rec	gistered
SIGNATURE	J											
SIGNATORIE	Signature: typed or printed name of registered age	re and title	if applicable (NO	11: Register	ed Ago	nt signatur	e required w	hen reinstating)	DATE			· · · · · · · · · · ·
12.	OFFICERS ANI	DIREC		13.				ADDITIONS/CHANGES TO OFFICE	ERS AND			
TITLE	D		☐ DELETE		1.1 TITLE					Chan	ge L	Addition
NAME AMIN, JACK			1,2 N				l	. a				
STREET ADDRESS 3041 WHISPER LAKE LANE ST			£ 1.3 S			ADDRESS	1221	warrenton Rd				
CITY-ST-ZIP	WINTER PARK FL 32792				CITY-S	T-ZIP	<u> </u>					
TITLE	D		DELETE	2.1	TITLE					L Chan	ge L	Addition
NAME	AMIN, JOHN			2.2	NAME							
STREET ADDRESS	3041 WHISPER LAKE LANE S	TE E		2.3	STREET	ADDRESS						
CITY-ST-ZIP	WINTER PARK FL 32792				CITY-S	ST - ZIP	- RS					
TITLE			☐ DELETE	1	TITLE		OW	icer /Treasurer		☐ Chan	ose 11	Addition
NAME					NAME		ואפרו	marienten Rd				
STREET ADDRESS				3.3	STREET	ADDRESS	121	marienter ica	_			
CITY-ST-ZIP			Deceme	_	CITY-S	ST - ZIP	Min	for Park, FL 3U19'	<u>L</u>	T 1 65		1.4499
TITLE			☐ DELETE		IIILE					L Chan	ge L	Addition
NAME				4. 2	NAME							
STREET ADDRESS						ADDRESS						}
CITY-S1-ZIP				4.4 CITY - 1		T-ZIP	ļ			T ~		1.420
TITLE			☐ DELETE	5.1 THTLE						L. Chan	ge L	Addition
NAME					MAME							ļ
STREET ADDRESS				5.3 3	STREET	ADDRESS						ŀ
CITY-ST-ZIP			T No.		CITY-S	T-ZIP	<u> </u>				·	
TITLE			☐ DELETE		IITLE		1			☐ Chan	ge L	Addition
NAME				621	NAME							
STREET ADDRESS				635	STREET	ADDRESS						

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 suppliemental 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.

4-29-28 (402) 657-14/8

FILED

May 06 1998 8:00am

Secretary of State