

2003 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91164 022 ***150.00

DOCUMENT # P96 0000 48145
1. Entity Name

TEK VISION, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8233 Gator Lane

3. Mailing Address
P. O. Box 5358

Suite, Apt. #, etc.
Suite 4

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
West Palm Beach, Florida

City & State
Lake Worth, Florida

4. FEI Number
65-0679120

Applied For
Not Applicable

Zip
33411

Country

Zip
33466-5358

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Orthnell Cash

Street Address (P.O. Box Number is Not Acceptable)
8233 Gator Lane, Suite 4

City
West Palm Beach FL Zip Code
33411

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Orthnell Cash* Pres. ORTHNELL CASH

(NOTE: Registered Agent signature required when reinstating)

29 Apr 2003. DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Orthnell CASH 2270 Ridgewood Circle Royal Palm Beach, Florida
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST Orthnell CASH 2270 Ridgewood Circle Royal Palm Beach, Florida
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IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Orthnell Cash* ORTHNELL CASH, PRES.

29 Apr 2003 Date

561-790-4164 Daytime Phone #

CR2E034B (12/02)