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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000082849

1. Corporation Name

FUTURE VISION ENTERPRISES INC.

Dringing Diago of Punings

Mailing Address

**FILED** Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90035 003 \*\*\*150.00



Principal Flac	e or business	Maining Address						
9370 LAUREL O	GREEN DRIVE	9370 LAUREL GREEN DRIVE			1			
BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33437								
us us					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					10/08/1996			
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For	
$\Box$ / $\Box$ $b$				un Ban.	65-0698701	- N	ot Applicable	
		Suite, Apt. #, etc.	<del>Cerjur</del>	19-10-1		<del></del>	Additional	
				•	5. Certificate of Status Desired	•	Required	
22 🕏	<u> </u>	27		<del></del>			<del> </del>	
City & State City & State				II.	6. Election Campaign Financing	•	May Be	
13 BOYNTON DEACH TIA 28 DOYMON BOK			ch	VIR	Trust Fund Contribution	Added	to Fees	
Zip /	Country	Zip	Country	/ _	8. This corporation owes the current year	ır Intangible 🔍	. ,	
24 334.	36 II USA	29 33436 30	] <i>[ll.</i>	SA .	Personal Property Tax.	☐Yes	XINo	
	9. Name and Address of Currer		J Y ~~		10. Name and Address of New Registe	red Agent		
	3. Nome and 7. Con		81	Name				
COR	PORATE CREATIONS ENTERPR	ISES, INC.		<u></u>				
CORPORATE CREATIONS ENTERPRISES, INC.					82 Street Address (P.O. Box Number is Not Acceptable)			
4521 PGA BLVD. STE 211								
PALI	M BEACH GARDENS FL 33418		83	il.			•	
					<del></del>	los l Zin	Code	
			84	City		FL 85 Zip	Code	
	10	O 4 COT 4EDD Florida Chabitan	the obox	na namad sam	oration submits this statement for the purpos		s registered	
office or r	registered agent or both in the State	of Florida, Such change was author	orized by	the corporation	on's board of directors. I hereby accept the a	ppointment as r	egistered	
agent. I a	am familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statutes	3.			_	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	gistered Age	nt signature required	d when reinstating) DAT	Ε		
12.	<del></del>	ID DIRECTORS	13.	<del></del>	ADDITIONS/CHANGES TO OFFICER	S AND DIRECT	ORS IN 12	
τπιε	90	☐ DELETE	1.1 TITLE			Change	☐ Addition	
	} * <del>*</del>		1.2 NAME	}				
NAME	MILLER, DEBORAH			/	101 MA MARCHAINE RA			
STREET ADDRESS	9370 LAUREL GREEN DRIVE		1.3 STREE	TADDRESS 0	706 MAHOGANY BAY	22//2	1	
C/TY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY-5	ST-ZIP	BOYNTON BULL THA			
TITLE		☐ DELETE	2.1 TITLE	1		Change	☐ Addition	
NAME			2.2 NAME					
			1	T ADDRESS				
STREET ADDRESS				1	•	•		
CITY-ST-ZIP			2.4 CITY-	ST-ZIP			The state of	
TITLE	}	- DELETE	3.1 TITLE	ſ		Change	Addition	
NAME			3.2 NAME					
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	1				•			
CITY-\$T-ZIP	<del> </del>	☐ DELETE	3.4. CITY-	31-414		☐ Change	Addition	
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NAME	\ 		4. 2 NAME	(				
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	ST-7IP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition	
	1		5.1 NAME	ľ			_	
NAME	ĺ		1					
STREET ADDRESS	{	i	5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP			•	
TITLE								
THE		□ DELETE	6.1 TITLE			☐ Change	☐ Addition	
		☐ DELETE	•			☐ Change	☐ Addition	
NAME		☐ DELETE	6.2 NAME			☐ Change	Addition	
NAME STREET ADDRESS		☐ DELETE	6.2 NAME	T ADDRESS		☐ Change	☐ Addition	

14. 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, with all other like empowered.

**SIGNATURE**