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

PROFIT* **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P9700000639 (9)

Principal Place of Business	Mailing Address		
1051-600 THINEST ITT WAY	DAVID-TU-00004		

FILED May 19 1998 8:00am Secretary of State

VISION	CAR, INC.				
Principal Plac	e of Business	Mailing Address			. 8 (1) 8 (1) 8 (1) 1 (1) 1 (1) 1 (1) 1 (1)
TOST-BOUTH	COUTHWEST TIT WAY 1051 SOUTHWEST TIT WAY DAVIE TO SOCIAL		DO NOT WRITE IN THIS SPACE		
•				3. Date Incorporated or Qualified 01/03/1997	
2. Principal P	Place of Business	2a. Mailing Address 26 - 5/////		4. FEI Number	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	Landerdole, PL	City & State		6. Election Campalgn Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3333)	5 25 OSA		Country 30	This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible
343	9, Name and Address of Current I BERILAWYER CHARTERED 3 ALMERIA AVENUE BRAL GABLES FL 33134	registered Agent	81 Name 3 82 Street Add	10. Name and Address of New Registere And Address (P.O. Box Number is Not Acceptable)	d Agent
11. Pursuant office or ragent. La	to the provisions of Sections 607.0502 egistered agent, or both, of the State of marker with, and account the obligation	Levi de KonTO		reporation submits this statement for the purpose ation's board of directors. I hereby accept the a	85 Zip Code of changing its registered ppointment as registered
	Manure book or physicianic at equived a greek	ed the tappleable (NOTE	Registered Agent signature requ		
12.	OFFICERS AND I	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
	BONITO, ANTHONY P	[] OFFER	1.1 TITLE		Change Addition
NAME OTREET ADODESS	1051 SOUTHWEST 111 WAY		1.2 NAME	In thank b. Boulto	
STREET ADDRESS	DAVIE FL 33324		1.3 STREET ADDRESS	(3160 2. Mg 1 Mgh 6 Brick	ሳኅላም
CITY-ST-ZIP TITLE	DATE I E 33324	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	fort fangerdale LF 9	ASS Addition
NAME		בן סנננונ			Change Addition
STREET ADDRESS			2.2 NAME		
CITY-ST-ZIP			2 3 STREET ADDRESS		
TITLE		DELETE	2.4 CITY-ST-ZIP		Change Addition
NAME			3.2 NAME		comenge modition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CHY-SI-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
City-St-ZIP					
·····	erlify that the information supplied with	this filing does not qualify for	the exemption stated in	Section 119.07(3)(i) Florida Statutes I further	cortify that the information

indicated on this annual report or supplied with his him globes not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Forther certify that the informatio 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 eath; 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 in our application with an address.