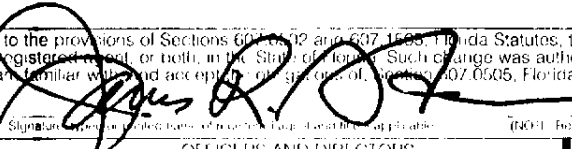
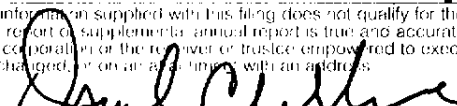


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000031062 1. Corporation Name New Vision Equity Partners, Inc.			
Principal Place of Business 16 Glendale Clearwater Beach, FL33767		Mailing Address 16 Glendale Clearwater Beach, FL 33767	
2. Principal Place of Business 21 16 Glendale Suite, Apt. #, etc. 22 City & State Clearwater Beach, FL 23 Zip 33767 Country USA		2a. Mailing Address 26 16 Glendale Suite, Apt. #, etc. 27 City & State Clearwater, FL 28 Zip 33767 Country USA	
9. Name and Address of Current Registered Agent Franklyn J. Wollett, P.A. 2790 Sunset Point Rd. Clearwater, FL 33759		10. Name and Address of New Registered Agent 81 James R. Stearns, Esq. 82 Street Address (P.O. Box Number is Not Acceptable) 1370 Pinehurst Rd. 83 84 City Dunedin FL 85 Zip Code 34698	
11. Pursuant to the provisions of Sections 607.02 and 607.1005, 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 provisions of Sections 607.02 and 607.1005, Florida Statutes. SIGNATURE  (FOR Registered Agent signature required when re-stating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Scott Ogilvie 16 Glendale, Clearwater Beach, FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President Scott Ogilvie 16 Glendale Clearwater Beach, FL 33767 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Thomas J. Peters 946 Woodland Drive Palm Harbor, FL 34683 ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer David Wilcox 2517 Northfield Land Clearwater, FL 33761 ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	500002499415 -04/24/98--01035--020 ***150.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	464/24 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition
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 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 amendment with an address. SIGNATURE:  Tues 4/17/98 813-725-1198 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #			

CP2E034 (10/97)