

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

FILED
Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90030 018 ***150.00

DOCUMENT # P98000053563

1. Corporation Name

VISION ENTERTAINMENT GROUP CORP.

Principal Place of Business

4410 NORTHWEST 13TH STREET
LAUDERHILL, FL 33313

Mailing Address

4410 NORTHWEST 13TH STREET
LAUDERHILL, FL 33313

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1998

4. FEI Number

65-0844267

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 16300 N.E. 19th Ave

Suite, Apt. #, etc.

22 #102

City & State

23 North Miami Bch Fla

Zip

24 33162

Country

25 DADE

2a. Mailing Address

26 163 NE 15th Ave

Suite, Apt. #, etc.

27 #102

City & State

28 North Miami Bch Fla

Zip

29 33162

Country

30 DADE

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name Same as stated in #9

82 Street Address (P.O. Box Number is Not Acceptable)

83 Same

84 City Same FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE SAME AS ABOVE

Signature, typed or printed name of registered agent and title if applicable

(NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME FARROW, JOE W
STREET ADDRESS 4410 NORTHWEST 13TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE VD ☐ DELETE

NAME HODGES, TIMOTHY
STREET ADDRESS 4410 NORTHWEST 13TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE VD ☐ DELETE

NAME KIGHT, ALBERT
STREET ADDRESS 4410 NORTHWEST 13TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE SD ☐ DELETE

NAME KIGHT, RUENETTE
STREET ADDRESS 4410 NORTHWEST 13TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE TD ☐ DELETE

NAME FARROW, GWENDOLYN H
STREET ADDRESS 4410 NORTHWEST 13TH STREET
CITY-ST-ZIP LAUDERHILL FL 33313

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Managing Director ☐ Change ☒ Addition

1.2 NAME LESTER KINNON
1.3 STREET ADDRESS 16300 N.E. 19 Ave
1.4 CITY-ST-ZIP North Miami Bch FLA 33162

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 attachment with an address, with all other like empowered.

SIGNATURE:

Joe W. Farrow

4-28-99

305-919-1677

Date

Daytime Phone #

CR2E034 (11/98)

0093421