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

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # **P98000057029**1. Corporation Name LEGALVISION ENTERPRISES OF FLORIDA, INC.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90127 008 ***158.75



				<u> </u>	4) B\$ £	(1864 1841 1881
Principal Place	e of Business	Mailing Address				
2115 VALENCIA	ROAD	2115 VALENCIA ROAD				
ORLANDO FL 32803		ORLANDO FL 32803		DO NOT WRITE IN TH	IS SDACE	
					3 SFACE	
				3. Date Incorporated or Qualified 04/30/1998	-	٠ ـ ١
		, la line Address		4, FEI Number	T An	plied For
	lace of Business	2a. Mailing Address	P.I	4. FET Number	<u> </u>	t Applicable
	Valencia Rd.	26 2115 Valencia	Nu	 	\$8.75 A	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Re	-
22		27				
- 1 <i>i</i> 1	City & State City & State City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
23 Urian			ountry ,			J 1 663
Tip 7 Q	Country	\vdash $\Rightarrow 202 \lnot$	1/04	 This corporation owes the current year I Personal Property Tax. 	Triangible ☐ Yes	De No
24 JZ00	25 V 3 /7	29 52 005 30	<i>V3//</i>	10. Name and Address of New Registere		25110
	9. Name and Address of Curre	Registered Agent	81 Name	10. Name and Hadreds of their (togisters	- 1.80	
BAR	R, DARREN					
	VALENCIA ROAD		82 Street Address (P.O. Box Number is Not Acceptable)			Į
ORLANDO FL 32803			83			
0112			63			
	•		84 City		85 Zip C	Code
320				F		
office or r	egistered agent, or both, in the Stat	e of Florida. Such change was authorizations of, Section 607.0505, Florida St.	ed by the corporate	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as reg	gistered
SIGNATURE	m rammar with, and accept the cong	parons of, cooler our soco, remains our				ļ
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: Register	ed Agent signature require	d when reinstating) DATE		
12.		ND DIRECTORS 13	3.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PSTD	DELETE 1,1	TITLE		Change	Addition
NAME.	BARR, DARREN	1.2	NAME			J
STREET ADDRESS	2115 VALENCIA ROAD	1.3	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32803	1.4	CITY-ST-ZIP			
TITLE	VD ·		TITLE		☐ Change	Addition
NAME	WRIGHT, RICHARD	22	NAME -	-		- 1
STREET ADDRESS	2115 VALENCIA ROAD	23	STREET ADDRESS			- [
	ORLANDO FL 32803		CITY-ST-ZIP			ነ
CITY-ST-ZIP TITLE	J. 12 1 12 0 1 2 0 12 0 12 0 12 0 12 0 12		TITLE		Change	Addition
NAME	,	-	NAME		•	
		ď	STREET ADDRESS			
STREET ADDRESS		1				
CITY-ST-ZIP TITLE	<u> </u>		CITY-ST-ZIP		Change	Addition
					_ ,	_
NAME			NAME			1
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		CITY-ST-ZIP		Change	Addition
TITLE			TITLE NAME		LJ viidinge	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME	·		J			}
STREET ADDRESS			STREET ADDRESS			1
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE	1	- Office is	TITLE		☐ Change	Addition
NAME		J	NAME		•	
STORET ADDRESS	•	6.3	STREET ADDRESS			

6.4 CITY-ST-ZIP 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 seceiver 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 or an attachment with an address, with all other like empowered.

SIGNATURE: