2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000035450

Entity Name: TWIN VISION, INC.

FILED May 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

186 NW 108 AVE 312 SW 78TH AVE

CORAL SPRINGS, FL 33071 N. LAUDERDALE, FL 33068

Current Mailing Address: New Mailing Address:

186 NW 108 AVE 103 KINGS CASTLE DR CORAL SPRINGS, FL 33071 APEX, NC 27502

FEI Number: 65-0918213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOHN, TRICIA J KOHN, TRICIA J VD 186 NW 108 AVE 312 SW 78TH AVE

CORAL SPRINGS, FL 33071 US N. LAUDERDALE, FL 33068 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TRICIA KOHN 05/11/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

KOHN, JAMES B KOHN, JAMES B PD Name: Name: 186 NW 108 AVE 103 KINGS CASTLE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: APEX, NC 27502

Title: VD Title: VD (X) Change () Addition () Delete

Name: KOHN, TRICIA J Name: KOHN, TRICIA J VD 186 NW 108 AVE Address: 103 KINGS CASTLE DR Address: CORAL SPRINGS, FL 33071 APEX, NC 27502 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TRICIA KOHN VD 05/11/2007