

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000093447

1. Entity Name

INVISION INTERNATIONAL TECHNOLOGIES, INC.

Principal Place of Business
930 Aragon Avenue
Winter Park, FL 32789Mailing Address
the same

2. Principal Place of Business

1000 Holt Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE # 1412

City & State

City & State

WINTER PARK, FL 32789

Zip

Country

Zip

Country

32789

USA

6. Name and Address of Current Registered Agent

4. FEI Number
59-3604355

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Spiegel & Utrera, P.A.
343 Almeria Avenue
Coral Gables, FL 33134Name
Spiegel & Utrera, P.A.Street Address (P.O. Box Number is Not Acceptable)
343 Almeria AvenueCity
Coral Gables

FL

Zip
33134

8. 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

By: Spiegel & Utrera, P.A.

SIGNATURE
Natalia Utrera, Vice-President

9/28/00

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
First Fund Contribution.\$5.00 Add. Be
Added to Fees

OFFICERS AND DIRECTORS

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS II

11. OFFICERS AND DIRECTORS		12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS II	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD Deaver, Michael 930 Aragon Avenue Winter Park, FL 32789	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	6000003415876 -10/05/00--01107--005 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CEOD Dhanani, Alykhan 930 Aragon Avenue Winter Park, FL 32789	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CEO / CHAIRMAN DHANANI, ALYKHAN 1000 HOLT AVE SUITE 1412 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	CTO MICHAEL KOCHIASHIVILI 1000 HOLT AVE SUITE 1412 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DIRECTOR DR. SUZANNE MILLER 3120 DOWNS COVE RD WINDERMERE, FL 34788
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SECRETARY/TREASURER SHIRAZ DHANANI 1000 HOLT AVE SUITE 1412 WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alykhan Dhanani

Sept 26 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR