2000 UNIFORM BUSINESS REPORT (UBR) P990000942 DOCUMENT # VISION OF CORPORATION. Power Temp-Leasing, Inc. 00 SEP 27 AM 6: 40 Principal Place of Business Mailing Address 5391W20AVE Hialeah FI 33012 2. Principal Place of Business 3. Mailing Address ame DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 5391 W 2014 Applied For 4. FEI Number City & State Hisolean, Fl 33012
Zip
33012 USA 65- lo2 0703 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7._Name and Address of New Registered Agent Address of Current Registered Agent Name Alexander Sandinas Street Address (P.O. Box Number is Not Acceptable) 5391 W 20AUE Higleah, Fl 33012 Zip Code つろのり City 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be-After MAY 1, 2000 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 · OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change President TITLE TITLE ☐ Delete Alexander Sardinas 5391 waons Highean Fi 33012 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME 700003415217--5 -10/06/00--01020--008 STREET ADDRÉSS STREET ADDRESS CITY-ST-ZIP + CITY-ST-ZIP **** 150.00 start 159 aumon ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIE Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS Jane Annuege CITY-ST-ZIP CITY-ST-ZIE Addition Change ☐ Delete TITLE THILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF 13. 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 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 Alexander Sandinas 8-30-00 SIGNATURE:

500

7-26-00

To: The person receiving this letter.

I never received this Form to File this Corporation, when I spoke to someone in the Corporation Division they inform me to make this letter and that would put me in complience of the time period.

Thank You,

Alex Sardinas