

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000104602

Entity Name: MINDVISIONS, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

2500 QUANTUM LAKES DR
BOYNTON BEACH, FL 33426

New Principal Place of Business:

PO BOX 272753
BOCA RATON, FL 33427

Current Mailing Address:

PO BOX 272753
BOCA RATON, FL 33427

New Mailing Address:

FEI Number: 59-3615205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLCOMB, PAUL
2727 MISTY OAKS CIRCLE
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, ORLANDO L
Address: PO BOX 272753
City-St-Zip: BOCA RATON, FL 33427

Title: S () Delete
Name: HAADSMA, THOMAS
Address: PO BOX 272753
City-St-Zip: BOCA RATON, FL 33427

Title: T () Delete
Name: HOLCOMB, PAUL
Address: PO BOX 272753
City-St-Zip: BOCA RATON, FL 33427

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: HERNANDEZ, ORLANDO L
Address: PO BOX 272753
City-St-Zip: BOCA RATON, FL 33427

Title: P (X) Change () Addition
Name: HAADSMA, THOMAS
Address: PO BOX 272753
City-St-Zip: BOCA RATON, FL 33427

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THOMAS HAADSMA

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date