

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S03670

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: VISION INDUSTRY PRODUCTS, INC.

**Current Principal Place of Business:**

8564 NW 64 ST  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

8564 NW 64 ST  
MIAMI, FL 33166 US

**New Mailing Address:**

FEI Number: 65-0218329      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ENGLE, AL  
11340 SW 156 AVENUE  
MIAMI, FL 33196 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: V ( ) Delete  
Name: ROTH, LEON  
Address: 13701 SW 12TH ST.  
City-St-Zip: PEMBROKE PINES, FL

Title: PST (X) Delete  
Name: PLAZA, JULIAN E  
Address: 4101 PINE TREE DR 1715  
City-St-Zip: MIAMI BEACH, FL 33140

Title: C ( ) Delete  
Name: ENGLE, AL  
Address: 11340 S W 156 AVE  
City-St-Zip: MIAMI, FL 33196

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: ROTH, LEON  
Address: 13701 SW 12TH ST.  
City-St-Zip: PEMBROKE PINES, FL

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

Title: PST (X) Change ( ) Addition  
Name: ENGLE, AL  
Address: 11340 S W 156 AVE  
City-St-Zip: MIAMI, FL 33196

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: AL ENGLE

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PRES

03/30/2009

\_\_\_\_\_ Date