PROF CORPORANNUAL F	ATION REPORT 06		DIV	RIDA DEPARTME Sandra B. Mo Secretary of VISION OF CORF	orth Sta		
OCUMEN Corporation Name		S73375	Ď	(5)			
		SS MANAGEMI	ent cente	ER, INC.			
rincipal Place of Bus	siness		Mailing Addre			A TO DESIGN OUT SOURCE SEEMS LISTER TO	888) Alli Bigzi qibil Bibil diqil Azbit qibil 788)
8585 SUNSET DRIV SUITE 60 MIAMI FL 33143	VE		8585 SUNS Suite 60 Miami FL 3			3. Date Incorporated or Qualified 08/12/1991	d 3a. Date of Last Report 05/01/1995
. Principal Place of	Business		2a. Mailing Ad	ddress		4. FET Number 65-0282812	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Api	ot. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & Sta	tate		Election Campaign Financing     Trust Fund Contribution	Added to Fees
Z <sub>I</sub> p	<u> </u>	ountry	Ζιρ		Contry	8. This corporation has liability for florida Statutes	for in anothle tax under s. 199.032, Yes (1 No
9.	Name and A	Address of Current	[29] Registered Age	ent 30	B1 Name	10. Name and Address of New	
MILLER, ARL 8585 SUNSE SUITE 60 MIAMI FL 33	ET DRIVE 3143	Sections 607.0502	and 607.1508. F	Florida Statutes, th	83 City	dress (P.O. Box Number is Not Acceptoration submits this statement for the pard of directors. Thereby accept the a	FL 85 Zip Code
8585 SUNSE SUITE 60 MIAMI FL 33 1. Pursuant to the or registored ag familiar with, and	B143  provisions of gent, or both, accept the	obligations of, Sections of sections of rame of registered agent a	on 607,0505, Flor	orida Statutes.	84 City  the ablive named corporation's books again Agent Sylatin to the	ionation submits this statement for the pard of directors. Thereby accept the a	PL 85 Zip Code  purpose of changing its registered office appointment as registered agent. I am  DATE  OFFICERS AND DIRECTORS IN 12
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