

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # V12357 (2)

1. Corporation Name

INVISION DISPLAYS, INC.

95 MAR 13 AM 11:53

Principal Place of Business

9201A W. SAMPLE ROAD
SUITE 133
CORAL SPRINGS FL 33065
US

Mailing Address

9201A W. SAMPLE ROAD
SUITE 133
CORAL SPRINGS FL 33065
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/04/1992

3a. Date of Last Report

02/23/1994

4. FEI Number

65-0315804

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21 4100 N Powerline Rd

2a. Mailing Address

26 4100 N Powerline Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Bldg D-3

27 Bldg D-3

City & State

City & State

23 Pompano Beach, FL

28 Pompano Beach, FL

Zip

Country

Zip

Country

24 33073

25 Broward

29 33073

30 Broward

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOKLEY, RONALD
9201A W. SAMPLE ROAD
SUITE 133
CORAL SPRINGS FL 33065

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7673 Parkview way

83

84 City Coral Springs

FL

85 Zip Code 33065

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	YOKLEY, RONALD
STREET ADDRESS	7673 PARKVIEW WAY
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	D
NAME	YOKLEY, MARILYN
STREET ADDRESS	7673 PARKVIEW WAY
CITY-ST-ZIP	CORAL SPRINGS FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ronald S. Yokley
Signature and typed or printed name of signing officer or director

Ronald S. Yokley/ President

3/7/95

Date

305-969-0644

Daytime Phone