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May 09 1997 8:00am
Secretary of State

*PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V55238

(2)

1. Corporation Name

VISION INDUSTRIES, INC.

Principal Place of Business

7501 NW 4TH STREET
#112
PLANTATION FL 33317

Mailing Address

7501 NW 4TH STREET
#112
PLANTATION FL 33317-2246

2. Principal Place of Business

21 12920 SW 14th

Suite, Apt. #, etc.

22

City & State

23 DAVIDE FL

24 33325

Country

25 BROWARD

2a. Mailing Address

26 BOX 515

Suite, Apt. #, etc.

27

City & State

28 SAXONDURG PA.

29

Zip

30 16056

Country

31 BUTLER

9. Name and Address of Current Registered Agent

WACHHOLDER, BARRY L
7501 NW 4TH STREET
#112
PLANTATION FL 33317

3. Date Incorporated or Qualified

07/31/1992

3a. Date of Last Report

04/03/1996

4. FEI Number

65-0353907

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME HAINES, DARLENE
STREET ADDRESS 1040 STIRLING ROAD BLDG A
CITY-ST-ZIP DANIA FL

TITLE D ☐ DELETE

NAME SAIBER, MICHAEL 12920 SW 14th Ct
STREET ADDRESS 1040 STIRLING ROAD BLDG A
CITY-ST-ZIP DANIA FL DAVIDE

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRES. ☒ Change ☐ Addition

1.2 NAME LORA LEE SAIBER
1.3 STREET ADDRESS 12920 S.W. 14th Ct
1.4 CITY-ST-ZIP DAVIDE FL 33325

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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

CR2E034 (9/96)