

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90333 004 ***150.00

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DOCUMENT # **J39791**

1. Entity Name
VISIONS CONSTRUCTION CORP.



Principal Place of Business 1255 S MILITARY TRAIL DEERFIELD BEACH FL 33442 US	Mailing Address 1255 S MILITARY TRAIL DEERFIELD BEACH FL 33442 US
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2. Principal Place of Business <i>1255 S. Military Trail</i> Suite, Apt. #, etc. <i>Ste 200</i>	3. Mailing Address <i>1255 S. Military Trail</i> Suite, Apt. #, etc. <i>Ste 200</i>
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CHECK HERE IF MAKING CHANGES

City & State <i>Deerfield Beach FL</i>	City & State <i>Deerfield Beach FL</i>	4. FEI Number 59-2737160 <input checked="" type="checkbox"/>	Applied For Not Applicable
Zip <i>33442</i>	Country <i>U.S.</i>	Zip <i>33442</i>	Country <i>U.S.</i>
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WALDMAN, ANA MARIA ROIG 1255 S MILITARY TRAIL DEERFIELD BEACH FL 33442		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD WALDMAN, ANA MARIA ROIG 1255 S MILITARY TRAIL DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WALDMAN, ANDREW C. 1255 S MILITARY TRAIL DEERFIELD BEACH FL 33442 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *A.M. Waldman* **REQUIRED** *A.M. Waldman 07/08/03 (954)426-2600*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)



1255 South Military Trail • Deerfield Beach, Florida 33442 • (954) 426-2600

Attachment
10110147
539791

July 8, 2003

To Whom It May Concern:

We received the "2003 For Profit Corp" Uniform Business Report on July 7, 2003. This is the only notification we have received this year.

Enclosed is a copy of the envelope with the date received stamp on it.

Please accept this application with enclosed check for \$150.00 for the 2003 renewal.

Sincerely,

Ana Maria Roig Waldman, Pres.

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