2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N08000004539

Entity Name: RHONDA EYES ALLIANCE, INC.

Current Principal Place of Business:

% 13181 SW 49 COURT
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

% 13181 SW 49 COURT
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 30-0482995 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEBLANC, RHONDA
13181 SW 49 COURT
MIRAMAR, FL 33027 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

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: LEBLANC, PIERRE
Address: 13181 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: P ( ) Delete
Name: LEBLANC, RHONDA V
Address: 13181 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete
Name: BASTIEN, WIENER
Address: 758 NE 79 STREET CAUSEWAY
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete
Name: BROWNLEE, CAROL
Address: 2510 NE 208 TERRACE
City-St-Zip: MIAMI, FL 33180

Title: D ( ) Delete
Name: LEROY, ALIX
Address: % 13181 SW 49 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: SIMMS, ROBIN
Address: 13761 SW 37 COURT
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHONDA V LEBLANC PRE 05/01/2009

Electronic Signature of Signing Officer or Director — Date