

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000123586

Entity Name: EYESIGHT INC

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11025 SW 15 MANOR  
DAVIE, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 392  
HALLANDALE BEACH, FL 33008 US

**New Mailing Address:**

FEI Number: 65-1162246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GHAVAMI, CIA M  
11025 SW 15 MANOR  
DAVIE, FL 33324 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: P  
Name: GHAVAMI, CIA M  
Address: 11025 SW 15 MANOR  
City-St-Zip: DAVIE, FL 33324 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CIA MACK GHAVAMI

PRES

04/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date