


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 11, 2008 08:00 A
Secretary of State

DOCUMENT # P96000090590
 1. Entity Name
 HYATT OPTICAL, INC.



Principal Place of Business 6800 GULFPORT BLVD SO STE 219 ST PETERSBURG, FL 33707 US	Mailing Address 6800 GULFPORT BLVD SO STE 219 ST PETERBURG, FL 33707 US
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DO NOT WRITE IN THIS SPACE



04082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3439000	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRYAN, ROGER
 6800 GULFPORT BLVD SO
 STE 219
 ST PETERSBURG, FL 33707

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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 reconstituting) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00.

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BRYAN, ROBERT A 6800 GULFPORT BLVD S #219 SAINT PETERSBURG, FL 33707
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 04/23/08-80065-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Date 4-8/08 Daytime Phone # (727)344-2700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR