2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2008
Secretary of State

DOCUMENT# P01000010617

Entity Name: LENS DEPOT, INC.

Current Principal Place of Business:

6994 N.W. 42 ST
MIAMI, FL 33166

New Principal Place of Business:

7305 NW 56 STREET
MIAMI, FL 33166

Current Mailing Address:

6994 N.W. 42 ST
MIAMI, FL 33166

New Mailing Address:

7305 NW 56 STREET
MIAMI, FL 33166

FEI Number: 65-1093035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAJIN, ALVARO
6994 N.W. 42 ST
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

CHAJIN, ALVARO
7305 NW 56 STREET
MIAMI, FL 33166 US

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: ALVARO CHAJIN 08/28/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: CHAJIN MEJIA, ALVARO F
Address: 6994 N.W. 42 ST
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete
Name: GOMEZ ORTIZ, ADRIANA T
Address: 6994 N.W. 42 ST
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: CHAJIN MEJIA, ALVARO F
Address: 7305 NW 56 STREET
City-St-Zip: MIAMI, FL 33166

Title: SD (X) Change ( ) Addition
Name: GOMEZ ORTIZ, ADRIANA T
Address: 7305 NW 56 STREET
City-St-Zip: MIAMI, FL 33166

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

SIGNATURE: ADRIANA GOMEZ SD 08/28/2008
Electronic Signature of Signing Officer or Director Date