

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010905

Entity Name: S.O.B. VISION INC.

Current Principal Place of Business:

1022 WEST JASMINE LANE
NORTH LAUDERDALE, FL 33068

Current Mailing Address:

1022 WEST JASMINE LANE
NORTH LAUDERDALE, FL 33068 UN

FEI Number: 80-0964730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANCOIS, JOHN W
18800 NW 11 CT
MIAMI, FL 33169 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title P
Name FRANCOIS, JOHN W
Address 18800 NW 11 CT
City-State-Zip: MIAMI FL 33169

Title VP
Name ACIER, WINCHEL
Address 12335 SW 11TH ST
City-State-Zip: PEMBROKE PINES FL 33025

Title COO
Name STEWART, DONEICA
Address 1022 WEST JASMINE LANE
City-State-Zip: NORTH LAUDERDALE FL 33068

Title COF
Name BROWN, AYOKA
Address 1022 WEST JASMINE LANE
City-State-Zip: NORTH LAUDERDALE FL 33068

Title SECR
Name LOUIS, SAMANTHA M
Address 701 NW 214 ST APT 717
City-State-Zip: MIAMI GARDENS FL 33169

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

SIGNATURE: JOHN FRANCOIS

PRESIDENT

03/11/2014

Electronic Signature of Signing Officer/Director Detail

Date