2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Mar 03, 2005 08:00 AM **DOCUMENT # 266572 Secretary of State** 1. Entity Name GLOBAL CONTACT LENS, INC. Principal Place of Business Mailing Address 3991 NW 26TH ST. 3991 NW 26TH ST. MIAMI, FL 33142-6727 MIAMI, FL 33142-6727 01122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1002404 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CANCIO, ERNEST A DO NOT WRITE 320 SOUTH ROYAL POINCADNA BLVD. MIAMI, FL. 33166 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution, Added to Fees OFFICERS AND DIRECTORS 10. TS TITLE GRAVES, DAVID A NAME 3701 PARK AVENUE STREET ADDRESS CITY - ST - ZIP MIAMI, FL 33133 TITLE 000000249535 03703705-80006-022 150.00 NAME SMOKE, JOHN JR STREET ADDRESS 2261 LAKES OF BELVOURNE CITY-ST-ZIP MELBOURNE, FL CANCIO, ERNEST A NAME STREET ADDRESS 320 S. ROYAL POINCIANA DO NOT WRITE MIAMI SPRINGS, FL 33166 CITY-ST-ZIP TITLE IN THIS SPACE CANCIO, MARIA NAME STREET ADDRESS 320 S. ROYAL POINEIANA BLVD. MIAMI SPRINGS, FL 33166 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 approximated to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if