

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 541915

FILED  
Apr 28, 2002 8:00 AM  
Secretary of State

Entity Name: NU IMAGE OPTICAL CENTER, INC.

## Current Principal Place of Business:

NV IMAGE OPTICAL CENTER INC  
15015 N FLORIDA AVE  
TAMPA, FL 33613 US

## New Principal Place of Business:

NU IMAGE OPTICAL CENTER INC  
15015 N FLORIDA AVE  
TAMPA, FL 33613 US

## Current Mailing Address:

15015 N FLORIDA AVE  
TAMPA, FL 33613235 US

## New Mailing Address:

15015 N FLORIDA AVE  
TAMPA, FL 336131235 US

FEI Number: 59-1765643

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FUENTES, LAWRENCE E.  
1407 BUSCH BLVD. W.  
TAMPA, FL 33612 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: HOLBROOK, DEENA G  
Address: 910 TERRA MAR  
City-St-Zip: TAMPA, FL 33613

Title: VPS ( ) Delete  
Name: GONZALEZ, TREVA G  
Address: 12547 LACEY DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEENA G. HOLBROOK

PT

04/28/2002

Electronic Signature of Signing Officer or Director

Date