

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 541915

FILED
Jan 20, 2004
Secretary of State

Entity Name: NU IMAGE OPTICAL CENTER, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

15015 N FLORIDA AVE
TAMPA, FL 336131235 US

New Mailing Address:

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

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: VPS (X) Change () Addition
Name: GONZALEZ, TREVA G
Address: 5100 BURCHETTE RD. APT. 1805
City-St-Zip: TAMPA, FL 336471079

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

PY

01/20/2004

Electronic Signature of Signing Officer or Director

Date