

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A02000001087

**Entity Name:** THE EYEWEAR PLAN, LTD.

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

200 SOUTH BISCAYNE BLVD., SUITE 2500  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

6700 N.W. BROKEN SOUND PARKWAY, SUITE 202  
BOCA RATON, FL 33487

**New Mailing Address:**

**FEI Number:** 33-1017706

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAKALO, JAY M  
200 SOUTH BISCAYNE BLVD., SUITE 2500  
MIAMI, FL 33131 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

**GENERAL PARTNER INFORMATION:**

Document #: P02000085272  
Name: THE EYEWEAR PLAN GP, INC.  
Address: 6700 N.W. BROKEN SOUND PARKWAY, SUITE 202  
City-St-Zip: BOCA RATON, FL 33487

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: MICHAEL BLOCK

PRES

04/26/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date