2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2008 8:00 am Secretary of State

DOCUMENT # F0700001654 1. Entity Name EYEMASTERS, INC.						02-19-2008 90021 010 ***150.00		
Principal Plac	ce of Business	Mailing Address			1.1 : 4 .		1	
11103 WEST		11103 WEST AVENUE						
SAN ANTONIO, TX.,78213-1392			SAN ANTONIO, TX 78213-1392			,		
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01042008	Chg-P	CR2E034 (12/06	j)
City & State		City & State			4. FEI Number 02-0677	066		Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of	Status Desired	□ \$8.75 A Fee Requi	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New R		
CARITOL	CORDORATE SERVICES INC	_ ~		Name				
CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA STE A				Street Address (P.O. Box Number is Not Acceptable)				
TALLAHAS	SSEE, FL 32301							
				City			FL Zip Co	
8. The above the obligat	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registere	ed office or reg	istered agent, or both,	in the State of Flo	rida. I am familiar wit	n, and accept
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registerer	d Agent signature rec	quired when reinstating)		DATE	
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.		tribution.		\$5.00 May Be Added to Fees			
10.	OFFICERS AND		11.		ADDITIONS/C	HANGES TO OFFI	CERS AND DIRECTO	:
TITLE	CEO							Addition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRIN

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2.5-08

210-340-3531

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