

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91900 022 ****61.25

DOCUMENT # **F96000000176**



1. Entity Name
PARTNERS IN VISION INTERNATIONAL INC.

Principal Place of Business Mailing Address
3645 RUFFIN ROAD **3645 RUFFIN ROAD**
SUITE 300 **SUITE 300**
SAN DIEGO CA 92123 **SAN DIEGO CA 92123**

2. Principal Place of Business 3. Mailing Address
5185 Comanche Dr. #C **5185 Comanche Dr., #C**
~~5185 Comanche Dr.~~ Suite, Apt. #, etc.
Suite C **Suite C**
City & State City & State
La Mesa CA **La Mesa CA**
Zip Zip Country Country
91941 3558 USA **91941 3558 USA**



CHECK HERE IF MAKING CHANGES

4. FEI Number **45-0406814** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	MATSON, RICHARD
STREET ADDRESS	11395 LEGACY TERRACE
CITY-ST-ZIP	SAN DIEGO CA
TITLE	D <input type="checkbox"/> Delete
NAME	OPPERMAN, MELINDA
STREET ADDRESS	15894 LYONS VIY RD PO 43
CITY-ST-ZIP	JAMUL CA 91935
TITLE	VPD <input type="checkbox"/> Delete
NAME	CARR, THOMAS
STREET ADDRESS	20061 SUNSET OAKS DRIVE
CITY-ST-ZIP	RAMONA CA 92065
TITLE	D <input type="checkbox"/> Delete
NAME	TAHMISIAN, GREGG
STREET ADDRESS	3645 RUFFIN ROAD # 300
CITY-ST-ZIP	SAN DIEGO CA 92123
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 empowered to execute this report as required by Chapter 617, 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: *Melinda Opperman* **Melinda Opperman, Director**

4/29/03 619-64 4-2000

CR2E037 (10/02)