

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001399

FILED
Apr 22, 2007
Secretary of State

Entity Name: EYE CARE ASSOCIATES INC.

Current Principal Place of Business:

6800 30TH AVE. N.
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

9932 NW 5TH COURT
PLANTATION, FL 33324 US

Current Mailing Address:

6800 30TH AVE. N.
ST. PETERSBURG, FL 33710 US

New Mailing Address:

9932 NW 5TH COURT
PLANTATION, FL 33324 US

FEI Number: 59-3356961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLE, C. DELENE
6800 30TH AVE. N.
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

COLE, C. DELENE
9932 NW 5TH COURT
PLANTATION, FL 33324 US

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: C DELENE COLE

04/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: COLE, C. DELENE
Address: 6800 30TH AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33710 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: COLE, C. DELENE
Address: 9932 NW 5TH COURT
City-St-Zip: PLANTATION, FL 33324 US

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 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: C. DELENE COLE

CEO

04/22/2007

Electronic Signature of Signing Officer or Director

Date