2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 25, 2008 8:00 am Secretary of State

1. Entity Nam BRANIGA	MENT # J28326 IN OPTICAL, INC.				03-25-2008 900	008 036 ***15	60.00
Principal Place of Business 70 ROYAL PALM BOULEVARD SUITE C VERO BEACH, FL 32960		Mailing Address 70 ROYAL PALM BOULEY SUITE C VERO BEACH, FL 32960				,.	
2. Principal Place of Business - No P.O. Box # 70 Royal Polm Pointe Suite, Apr. #. etc.		3. Mailing Address 70 Royal Palm Pointe Suite, Apt. #. etc. Suite		1e 02202008	Chg-P C	R2E034 (12/06)	
City & State		City & State		4. FEI Number 59-27168	96	<u> </u>	olied For Applicable
Zip	Country	Zip	Country	5. Certificate of S	Status Desired	\$8.75 Addi	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name							
BRANIGAN, E.S. III 70 ROYAL PALM BLVD				Street Address (P.O. Box Number is Not Acceptable)			
SUITE C VERO BEACH, FL 32960			70	Royal Pa	Im Poin	t€ Sui:	te C
			City	,		FL Zip Code	+
	named entity submits this statement for ions of registered agent.	r the purpose of changing its re	egistered office or r	registered agent, or both, in	1	l am familiar with, a	and accept
SIGNATURE Signature, typed or printed name of registered agent and attention (NOTE: Registered Agent signature required when reinstating) DATE							
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0		oution.	\$5.00 May Be Added to Fees			
10.	OFFICERS AND	DIRECTORS Delete	11.	ADDITIONS/CH	ANGES TO OFFICERS	S AND DIRECTORS Change	IN 11
NAME STREET ADDRESS CITY-ST-ZIP	BRANIGAN, EDWARD S., III 70 ROYAL PALM BLVD. SUITE (VERO BEACH, FL		NAME STREET ADDRESS CITY-ST-ZIP	70 Royal 1 32960		te Suit	د د
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRANIGAN, CHRISTINA A. 70 ROYAL PALM BLVD, SUITE (VERO BEACH, FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	70 Royal 1	Palm Poin	Change te, Suit	□ Addition
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition
CITY-ST-ZIP			CITY-ST-ZIP				

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:

772 - 569 - 66 0 0 Daysime Phone #