

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019160

Entity Name: ALLIED EYECARE, LLC

FILED
Mar 18, 2008
Secretary of State

Current Principal Place of Business:

19321-C US HIGHWAY 19 N
SUITE 320
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

19321-C US HIGHWAY 19 N
320
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 59-3744453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORD, HARVEY A P.A.
C/O FORD & FORD, P.A.
575 SECOND AVENUE SOUTH, #201
ST. PETERSBURG, FL 33701 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RISAN HOLDINGS, INC., DBA SANCHEZ H O LDINGS
Address: 19321-C US HIGHWAY 19 N, SUITE 320
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOELLEN WOOTEN

CONT

03/18/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date