

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015333

Entity Name: LENS RX, LLC

FILED
Jul 14, 2005
Secretary of State

Current Principal Place of Business:

20855 NE 16TH AVE N
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

20855 NE 16TH AVE N
MIAMI, FL 33179

New Mailing Address:

FEI Number: 13-4203519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GILA, MENNY
5309 BANYAN LN
TAMARAC, FL 33179 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: MGR () Delete
Name: YALON, MOSHE DR.
Address: 2500 EAST HALLANDALE BEACH BLVD., SUITE N
City-St-Zip: HALLANDALE, FL 33009

Title: MGR () Delete
Name: SHARON, EZRA
Address: 3917 N.E. 167TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: SH () Delete
Name: GILA, MENNY
Address: 5309 BANYAN LANE
City-St-Zip: TAMARAC, FL 33319

Title: MGRG () Delete
Name: WANOUNOU, ALBERT
Address: 231-174TH ST. SUITE 1620
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: WANOUNOU, YACOV
Address: 2-29 KENNETH AVE
City-St-Zip: FAIR LAWN, NJ 07410

Title: MGRA () Delete
Name: KAPLAN, YARON
Address: 3017 N.E. 183 LANE
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALBERT WANOUNOU

MGR

07/14/2005

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