

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073481

FILED
Mar 23, 2009
Secretary of State

Entity Name: EYEFRANCHISE.COM, LLC

Current Principal Place of Business:

8295 NORTH MILITARY TRAIL
SUITE C
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

P O BOX 31041
PALM BEACH GARDENS, FL 33420 10

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIMON, ALAN R
8295 NORTH MILITARY TRAIL
SUITE C
PALM BEACH GARDENS, FL 33410 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: SIMON, ALAN R
Address: 8295 NORTH MILITARY TRAIL SUITE C
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: ALAN R. SIMON

MR.

03/23/2009

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