

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000034272

Entity Name: NATIONAL LENS LLC

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5622 BROOKDALE WAY  
TAMPA, FL 33625

**New Principal Place of Business:**

**Current Mailing Address:**

5622 BROOKDALE WAY  
TAMPA, FL 33625

**New Mailing Address:**

FEI Number: 20-4109059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BDB AGENT CO.  
5355 TOWN CENTER ROAD  
SUITE 900  
BOCA RATON, FL 33486 US

**Name and Address of New Registered Agent:**

DIAZ, ALLISON  
5622 BROOKDALE WAY  
TAMPA, FL 33625 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: ALLISON DIAZ

01/25/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PD  
Name: DIAZ, ALLISON  
Address: 5622 BROOKDALE WAY  
City-St-Zip: TAMPA, FL 33625 19

Title: D  
Name: DIAZ, RAMON  
Address: 5622 BROOKDALE WAY  
City-St-Zip: TAMPA, FL 33625

I hereby 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: ALLISON DIAZ

PD

01/25/2011

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