




**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M20940</b> 1. Entity Name INTERNATIONAL OPTICAL MART INC.			
Principal Place of Business 8667 N.W. 66TH ST. MIAMI, FL 33166 US		Mailing Address 8667 NW 66TH STREET MIAMI, FL 33166 US	
<b>DO NOT WRITE IN THIS SPACE</b>			
		01172007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2585780 Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  WONG, ENRIQUE A. 8667 N.W. 66TH ST. MIAMI, FL 33166		<b>DO NOT WRITE IN THIS SPACE</b>	
8. 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. I am familiar with, and accept the obligations of registered agent			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>DO NOT WRITE IN THIS SPACE</b>  U000000704184 04/23/07-80001-002 150.00	
TITLE	VSD		
NAME	WONG, ELENA		
STREET ADDRESS	12741 SW 62 TER		
CITY-ST-ZIP	MIAMI, FL		
TITLE	PTD		
NAME	WONG, ENRIQUE A.		
STREET ADDRESS	12741 SW 62 TER		
CITY-ST-ZIP	MIAMI, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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: X 		April 11/07 786-208-2020 Date Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			