

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001690

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: INTERNATIONAL SIGHT RESTORATION, INC.

## Current Principal Place of Business:

3808 GUNN HIGHWAY  
B  
TAMPA, FL 33618

## New Principal Place of Business:

## Current Mailing Address:

3808 GUNN HIGHWAY  
B  
TAMPA, FL 33618

## New Mailing Address:

FEI Number: 41-2030063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ MILLER, CHRISTINA  
3808 GUNN HIGHWAY  
B  
TAMPA, FL 33618 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

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FAIN, HENRIA  
Address: 2314 E. 22ND AVENUE  
City-St-Zip: TAMPA, FL 33605 US

Title: VD ( ) Delete  
Name: JOSEPHS, ELIAS  
Address: 4841 NW 58TH MANOR  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: SD ( ) Delete  
Name: MELTON, MARIZA  
Address: 907 WEST YUKON STREET  
City-St-Zip: TAMPA, FL 33604 US

Title: CEO ( ) Delete  
Name: SANCHEZ MILLER, CHRISTINA  
Address: 12518 RIVER BIRCH DRIVE  
City-St-Zip: RIVERVIEW, FL 33569 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: FAIN, HENRIA  
Address: 3808 GUNN HIGHWAY, SUITE B  
City-St-Zip: TAMPA, FL 33618 US

Title: T (X) Change ( ) Addition  
Name: JOSEPHS, ELIAS  
Address: 3808 GUNN HIGHWAY SUITE B  
City-St-Zip: TAMPA, FL 33618 US

Title: S (X) Change ( ) Addition  
Name: MELTON, MARIZA  
Address: 3808 GUNN HIGHWAY, SUITE B  
City-St-Zip: TAMPA, FL 33618 US

Title: P (X) Change ( ) Addition  
Name: SANCHEZ MILLER, CHRISTINA  
Address: 3808 GUNN HIGHWAY, SUITE B  
City-St-Zip: TAMPA, FL 33618 US

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINA SANCHEZ MILLER

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date