

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 17, 2010
Secretary of State

DOCUMENT# N02000001690

Entity Name: INTERNATIONAL SIGHT RESTORATION, INC.**Current Principal Place of Business:**3808 GUNN HIGHWAY
TAMPA, FL 33618**New Principal Place of Business:****Current Mailing Address:**3808 GUNN HIGHWAY
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
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: D
Name: FAIN, HENRIA DR.
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

Title: D
Name: JOSEPHS, ELIAS DR.
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

Title: D
Name: MELTON, MARIZA
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

Title: D
Name: SCHEER, DARREN
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

Title: D
Name: BRYAN, GERALD
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

Title: P
Name: SANCHEZ MILLER, CHRISTINA
Address: 3808 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33618 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTINA SANCHEZ MILLER

P

09/17/2010

Electronic Signature of Signing Officer or Director

Date