

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008301

FILED
Mar 28, 2008
Secretary of State

Entity Name: VISION SUR LA TORTUE, INC.

Current Principal Place of Business:

4951 BABCOCK ST NE
SUITE 3
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

4951 BABCOCK ST NE
SUITE 3
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 41-2212513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, ALFRED L
4951 BABCOCK ST., SUITE 3
PALM BAY, FL 329205 US

Name and Address of New Registered Agent:

SIMON, ALFRED L
4951 BABCOCK ST., SUITE 3
PALM BAY, FL 32905 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:

03/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: CARMEUS, JACOB
Address: 4951 BABCOCK ST., SUITE 3
City-St-Zip: PALM BAY, FL 329205

Title: S () Delete
Name: LUBIN, MARILYN
Address: 3833 N. ANDREWS
City-St-Zip: OAKLAND, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENRY, CARY
Address: 3833 N. ANDREWS AVE
City-St-Zip: OAKLAND, FL 33309

Title: S (X) Change () Addition
Name: ANNESTIN, SAINT-JUSTE
Address: 3833 N. ANDREWS AVE
City-St-Zip: OAKLAND, FL 33309

Title: T () Change (X) Addition
Name: CARMEUS, JACOB
Address: 4951 BABCOCK ST., SUITE 3
City-St-Zip: PALM BAY, FL 32905

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: SIMON, ALFRED L.

D

03/28/2008

Electronic Signature of Signing Officer or Director

Date