2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011197

Entity Name: VISION CONSULAR, CORP.

FILED May 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11755 SW 18TH STREET 409

MIAMI, FL 33175

Current Mailing Address: New Mailing Address:

11755 SW 18TH STREET 409 MIAMI, FL 33175

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

D' ARCE, JUAN F JR 11755 SW 18TH STREET **UNIT 409** MIAMI, FL 33175 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

D' ARCE, JUAN F JR. Name: Name: Address: PO BOX 351448 Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip:

Title: Title: () Delete () Change () Addition

MOLINA, ARMANDO Name: Name: Address: 12970 NW 9TH LANE Address: City-St-Zip: MIAMI, FL 33182 City-St-Zip:

Title: SEC () Delete Title: SEC (X) Change () Addition

RUIZ, MADELIN Name: D' ARCE, MADELIN Name:

11755 SW 18TH STREET, UNIT 409 11755 SW 18TH STREET, UNIT 409 Address: Address:

City-St-Zip: MIAMI, FL 33175 City-St-Zip: MIAMI, FL 33175

Title: () Delete Title: () Change () Addition

Name: SUAREZ, ANDRES Name: 7345 PINE VALLEY DRIVE Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip:

Title: Title: () Delete () Change () Addition

D' ARCE, FATIMA C Name: Name: 11755 SW 18TH STREET, UNIT 409 Address: Address: City-St-Zip: MIAMI, FL 33175 City-St-Zip:

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.

Ρ SIGNATURE: JUAN F. D' ARCE, JR. 05/02/2008