

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005259

**FILED**  
**Feb 27, 2008**  
**Secretary of State**

**Entity Name:** RECAPTURING THE VISION, INTERNATIONAL, INC.

**Current Principal Place of Business:**

9950 HIBISCUS ST.  
MIAMI, FL 33157

**New Principal Place of Business:**

9780 E INDIGO ST  
SUITE 301-303  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

9950 HIBISCUS ST.  
MIAMI, FL 33157

**New Mailing Address:**

9780 E INDIGO ST  
SUITE 301-303  
PALMETTO BAY, FL 33157

**FEI Number:** 65-0622266

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DELROSARIO, JACQUELINE  
10800 SW 135 TERRACE  
MIAMI, FL 33176 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/O ( ) Delete  
Name: DELROSARIO, JACQUELINE  
Address: 10800 SW 135 TERRACE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: ANTHONY, BERNARD  
Address: 9032 SW 152ND STREET  
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete  
Name: ALEXANDER, DARLEEN  
Address: 2625 PONCE DE LEON BLVD., STE. 280  
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete  
Name: BUKER, DIANE  
Address: 7790 SW 127TH STREET  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: GORDON, BEVERLY  
Address: 12205 SW 16TH TERRACE UNIT A-104  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BUKER, DIANE  
Address: 21836 HEBRON PLACE  
City-St-Zip: O'BRIEN, FL 32071

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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.

**SIGNATURE:** JACQUELINE, DELROSARIO

D/O

02/27/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date