

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000047257

FILED  
Feb 13, 2009  
Secretary of State

Entity Name: THE VISIONCARE FAMILY, INC.

## Current Principal Place of Business:

5542 S. FLAMINGO RD.  
COOPER CITY, FL 33330

## New Principal Place of Business:

## Current Mailing Address:

5542 S. FLAMINGO RD.  
COOPER CITY, FL 33330

## New Mailing Address:

FEI Number: 65-1012248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SICOIA, CRISTINA P OD  
4678 VILLAGE WAY  
DAVIE, FL 33314 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DR. ( ) Delete  
Name: SICOIA, CRISTINA P  
Address: 4678 VILLAGE WAY  
City-St-Zip: DAVIE, FL 33314

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition  
Name: CRISTINA SICOIA - PR, ESIDENT  
Address: 4678 VILLAGE WAY  
City-St-Zip: DAVIE, FL 33314 US

Title: MR ( ) Change (X) Addition  
Name: SICOIA DANIEL - VICE, PRESIDENT  
Address: 4678 VILLAGE WAY  
City-St-Zip: DAVIE, FL 33330 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRISTINA SICOIA

DR

02/13/2009

Electronic Signature of Signing Officer or Director

Date