

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000055633

Entity Name: ONE EYE SOLUTIONS, INC.

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13101 SW 16TH COURT  
DAVIE, FL 33325

**New Principal Place of Business:**

**Current Mailing Address:**

15841 PINES BLVD  
393  
PEMBROKE PINES, FL 33027

**New Mailing Address:**

13762 W STATE RD 84  
393  
DAVIE, FL 33325

FEI Number: 65-1019915

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EBANKS, MARK L  
13101 SW 16TH COURT  
DAVIE, FL 33325 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: EBANKS, MARK L  
Address: 13101 SW 16TH COURT  
City-St-Zip: DAVIE, FL 33325

Title: DIR  
Name: MCMANUS, BRAD  
Address: 13762 W STATE RD 84, #393  
City-St-Zip: DAVIE, FL 33325

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK L. EBANKS

D

05/01/2011

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

\_\_\_\_\_  
Date