

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000060474

FILED
Jan 07, 2004
Secretary of State

Entity Name: WE'RE ALL ABOUT EYES, P.A.

Current Principal Place of Business:

10300 W. FOREST HILL BOULEVARD
SUITE 288
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

10300 W. FOREST HILL BOULEVARD
SUITE 288
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 65-1114637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASON, MICHAEL O.D.
1900 OKEECHOBEE BLVD.
SUITE C-10
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

NASON, MICHAEL S O.D.
1900 OKEECHOBEE BLVD.
SUITE C-10
WEST PALM BEACH, FL 33409 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: MICHAEL S. NASON, O.D.

01/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SILVERSTONE, STEVEN L
Address: 7486 SALLY LYN LANE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: S () Delete
Name: NASON, MICHAEL S
Address: 7433 PRESCOTT LANE
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: SILVERSTONE, STEVEN L
Address: 6574 BLUE BAY CIRCLE
City-St-Zip: LAKE WORTH, FL 33467 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL S. NASON, O.D.

PRES

01/07/2004

Electronic Signature of Signing Officer or Director

Date