2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094505

Entity Name: LENSUR USA CORPORATION

FILED May 11, 2006 Secretary of State

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

6175 N.W. 153 ST.

#103

MIAMI LAKES, FL 33014

New Mailing Address: Current Mailing Address:

6175 N.W. 153 ST.

#103

MIAMI LAKES, FL 33014

FEI Number: 65-1141943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ODELLA, NELSON ODELLA, NELSON 407 LINCOLN RD. STE. 11-L 13360 SW 46 CT

MIAMI BEACH, FL 33139 MIRAMAR, FL 33027 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: NELSON ODELLA 05/11/2006

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: **PSTD** (X) Change () Addition

ODELLA, NELSON Name: Name: ODELLA, NELSON 407 LINCOLN RD STE 11-L 13360 SW 46 CT Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIRAMAR, FL 33027

Title: Title: FD (X) Change () Addition () Delete Name:

MINOLETTI, CARINA MINOLETTI, CARINA Name: 407 LINCOLN RD STE 11L 13360 SW 46 CT Address: Address: MIAMI BEACH, FL 33139 MIRAMAR, FL 33027 City-St-Zip: City-St-Zip:

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

DUTRA, GUILLERMO DUTRA, GUILLERMO Name: Name: 407 LINCOLN RD STE 11L 15715 S DIXIE HWY # 209 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: PALMETTO BAY, FL 33157

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

HERRERA, JORGE E HERRERA, JORGE E Name: Name: Address: 407 LINCOLN RD STE 11L Address: 450 SW 182 WAY City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139 PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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: CARINA MINOLETTI D 05/11/2006