

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000014136

FILED
Apr 30, 2003
Secretary of State

Entity Name: EYE LEVEL CORP

Current Principal Place of Business:

301 174TH ST. #801
SUNNY ISLES BCH, FL 33160

New Principal Place of Business:

3736 OAK RIDGE CIRCLE
WESTON, FL 33331

Current Mailing Address:

301 174TH ST. #801
SUNNY ISLES BCH, FL 33160

New Mailing Address:

3736 OAK RIDGE CIRCLE
WESTON, FL 33331

FEI Number: 02-0607954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARPEL, ISAAC
301 174TH ST. #801
SUNNY ISLES BCH, FL 33160

Name and Address of New Registered Agent:

KARPEL, ISAAC
3736 OAK RIDGE CIRCLE
WESTON, FL 33331

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: ISAAC KARPEL

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KARPEL, ISAAC
Address: 301 174TH ST. #801
City-St-Zip: SUNNY ISLES BCH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KARPEL, ISAAC
Address: 3736 OAK RIDGE CIRCLE
City-St-Zip: WESTON, FL 33331

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: ISAAC KARPEL

D

04/30/2003

Electronic Signature of Signing Officer or Director

Date