

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000111723

Entity Name: EYECON, INC.

**FILED**  
**Jul 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4304 ALTON ROAD  
LOWENSTEIN BLDG  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

4308 ALTON ROAD  
SUITE 870  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

16485 COLLINS AV  
432  
SUNNY ISLES, FL 33160

**New Mailing Address:**

FEI Number: 56-2298811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERNSTEIN, BARBARA  
16485 COLLINS AVE., #432  
SUNNY ISLES, FL 33160 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: MS  
Name: BERNSTEIN, BARBARA  
Address: 16485 COLLINS AVE., #432  
City-St-Zip: SUNNY ISLES, FL 33160

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: BARBARA BERNSTEIN

PRES

07/21/2010

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

\_\_\_\_\_  
Date