


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90181 036 ***150.00

DOCUMENT # P02000132222	
1. Entity Name SUNGLASSES COLLECTION, INC.	

Principal Place of Business 141 NW 46TH COURT FT LAUDERDALE FL 33309	Mailing Address 141 NW 46TH COURT FT LAUDERDALE FL 33309
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2. Principal Place of Business 4541 W. McNAB Rd.	3. Mailing Address 4541 W. McNAB Rd
Suite, Apt. #, etc. #10	Suite, Apt. #, etc. #10

1st MOORE CR2E034 (10/05)

City & State Pompano Beach FL	City & State Pompano Beach FL
Zip 33069	Zip 33069
Country	Country

4. FEI Number 27-0032551	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ALMANZA, ALVARO 141 NW 46TH COURT FT LAUDERDALE FL 33309	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4541 W. McNAB Rd. #10 City Pompano Beach FL Zip Code 33069	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Alvaro Almanza
Signature, typed or printed name of registered agent and title if applicable

April 11, 2006
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P ALMANZA, ALVARO 141 NW 46 CT. FORT LAUDERDALE FL 33309	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
President ALVARO Almanza 4541 W. McNAB Rd. #10 Pompano Beach FL 33069	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alvaro Almanza, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 11, 2006 Date
954-9785560 Daytime Phone #

VP 18663278877