## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000008657

Entity Name: MAJESTIC'S VISION, INCORPORATED

FILED Jul 06, 2005 Secretary of State

Current Principal Place of Business:  1121 ATLANTICE AVENUE			New Principal Place	New Principal Place of Business:	
OPA-LOCKA, FL 33054					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1121 ATLANTICE AVENUE					
OPA-LOCKA FL33054					
FEI Number: 65-1034738		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:					
SIMPKINS, PHYLLIS W 1121 ATLANTICE AVENUE OPA-LOCKA, FL 33054					
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:					
	Electro	onic 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: Name: Address: City-St-Zip:	SIMPKINS, PI	TICE AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	OPA-LOCKA EDU ( ESQUIRE, ST 2901 NW 206 MIA GARDEN	) Delete ANLEY ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( SIMPKINS, PI 19000 NW 8T MIAMI, FL 33	Н СТ	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( BOSTIC, URE 1496 APRIL A DELTONA, FL	VENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( DUNCOMB, S 2901 NW 189 MIAMI, FL 33	TH ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( HILL, CYNTHI 13855 NW 23 OPA LOCKA,	RD AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
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: CYNTHIA DIXON-HILL TRE 07/06/2005

Electronic Signature of Signing Officer or Director Date