2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008657

Entity Name: MAJESTIC'S VISION, INCORPORATED

FILED May 01, 2008 Secretary of State

Current Pr	incipal Place o	of Business:	New Principal Place	New Principal Place of Business:	
1121 ATLANTIC AVENUE OPA-LOCKA, FL 33054					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1121 ATLANTIC 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 ATLANTIC AVENUE OPA-LOCKA, FL33054					
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	
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/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () E SIMPKINS, PHYL 1121 ATLANTIC OPA-LOCKA, F	CAVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EDU () E ESQUIRE, STANI 2901 NW 206 ST MIA GARDENS, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () E SIMPKINS, PHYL 1121 ATLANTIC OPA-LOCKA, F	CAVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () E BOSTIC, URETHA 1496 APRIL AVE DELTONA, FL 32	NUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () E DUNCOMB, SANI 2901 NW 189TH MIAMI, FL 33056	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () E HILL, CYNTHIA P 13855 NW 23RD OPA LOCKA, FL	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
I hereby certify that the information supplied with this filing does not qualify 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					

SIGNATURE: PHYLLIS SIMPKINS CEO 05/01/2008

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.