2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 14, 2006 8:00 am Secretary of State DOCUMENT # P03000039383 04-14-2006 90147 027 ***150.00 1. Entity Name SUNGLASS PLUS OF SOUTH BEACH, INC. Principal Place of Business Mailing Address 400-2802 N 29 AVE 2802 N 29 AVE HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 No Cha-P CR2E034 (11/05) 04052006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 06-1684498 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PORTAL, RAFAEL DO NOT WRITE 2802 N 29 AVE HOLLYWOOD, FL 33020 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PORTAL, RAFAEL NAME 2802 N 29 AVE STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTEDNAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: ⊆

FILED

Daytime Phone #