## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000054801

Entity Name: SCRUPLES EYE OPTIQUE, INC

FILED Mar 23, 2009 Secretary of State

Entity Nai	me: SCRUPL	ES EYE OPTIQUE, INC.			
Current Principal Place of Business:			New Principal Pla	ice of Business:	
	MARSALA CT. SON, NV 8901	1			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
553 HARBOR COURT DELRAY BEACH, FL 33483				11 VILLA MARSALA CT. HENDERSON, NV 89011	
FEI Number	: 05-0569966	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
851 SE JC STUART, The above	RE SYSTEMS DHNSON AVE. FL 33494 US		ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATUI					
OIOINATOI		nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PS ( KAROSAS, LIN 11 VILLA MARG LAKE LAS VEG	GALA CT.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	KAROSAS, RA		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 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: R KAROSAS VP/T 03/23/2009