

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000084944

Entity Name: VISION OPTICS INC.

FILED  
Apr 28, 2004  
Secretary of State

## Current Principal Place of Business:

18830 WEST OAKMONT DRIVE  
MIAMI, FL 33015

## New Principal Place of Business:

## Current Mailing Address:

18830 WEST OAKMONT DRIVE  
MIAMI, FL 33015

## New Mailing Address:

P.O. BOX 171254  
HIALEAH, FL 33017

FEI Number: 56-2387714

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERNAL, ISABEL  
18830 WEST OAKMONT DRIVE  
MIAMI, FL 33015

## Name and Address of New Registered Agent:

BERNAL, ISABEL  
P.O. BOX 171254  
HIALEAH, FL 33017

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:

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D ( ) Change (X) Addition  
Name: SOSA, MANUEL  
Address: P.O. BOX 171254  
City-St-Zip: HIALEAH, FL 33017 US

Title: VPTD ( ) Change (X) Addition  
Name: BERNAL, ISABEL  
Address: 18830 WEST OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015 US

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: ISABEL BERNAL

VPD

04/28/2004

Electronic Signature of Signing Officer or Director

Date