

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137109

Entity Name: COSTA VISION, INC.

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

9061 SW 208 TERRACE
MIAMI, FL 33189

New Principal Place of Business:

8953 SW 210 TERRACE
MIAMI, FL 33189

Current Mailing Address:

P.O. BOX 561521
MIAMI, FL 33256

New Mailing Address:

FEI Number: 05-0609418

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEJIA, JUAN M
8953 SW 210 TERR
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEJIA, JUAN M
Address: 9061 SW 208 TERRACE
City-St-Zip: MIAMI, FL 33189 US

Title: VP () Delete
Name: MARIA, RIVAS C
Address: 9061 SW 208 TERRACE
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEJIA, JUAN M
Address: 8953 SW 210 TERRACE
City-St-Zip: MIAMI, FL 33189 US

Title: VP (X) Change () Addition
Name: MARIA, RIVAS C
Address: 8953 SW 210 TERRACE
City-St-Zip: MIAMI, FL 33189

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN MEJIA

P

01/03/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date