

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000001247

FILED
Jan 14, 2009
Secretary of State

Entity Name: DOWNTOWN EYEWEAR & ACCESSORIES INC.

Current Principal Place of Business:

32 SE 1 AVENUE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

32 SE 1 AVENUE
MIAMI, FL 33131

New Mailing Address:

P.O.BOX 45-2304
MIAMI, FL 33245

FEI Number: 02-0735558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, ELKY MS.
32 SE 1 AVENUE
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

GOMEZ, ELKY MS.
2520 SW 22 STREET # 2-255
MIAMI, FL 33145 US

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: EG

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOMEZ, ELKY
Address: P.O. BOX 45-2452
City-St-Zip: MIAMI, FL 33245

Title: VP () Delete
Name: NUNEZ, LOURDES
Address: P.O. BOX 45-2452
City-St-Zip: MIAMI, FL 33245

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EG

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date