2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021851

Name:

Address:

City-St-Zip:

FILED Apr 27, 2006 Secretary of State

Entity Name: OPTICMARKET, INC. **Current Principal Place of Business: New Principal Place of Business:** 5350 N.W. 35TH AVENUE FORT LAUDERDALE, FL 33309 **Current Mailing Address: New Mailing Address:** 5350 N.W. 35TH AVENUE FORT LAUDERDALE, FL 33309 FEI Number: 20-2542439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition KRUCZYNA, ROGER Name: Name: 5350 N.W. 35TH AVENUE Address: Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33309 Title: () Delete Title: TD () Change (X) Addition Name: Name: TARDELL, ROBERT 5350 N.W. 35TH AVENUE Address: Address: FORT LAUDERDALE, FL 33309 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete SD BUCH, NIKOLAUS Name: Name: 5350 N.W. 35TH AVENUE Address Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33309 Title: () Delete Title: () Change (X) Addition

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.

Name:

Address:

City-St-Zip:

SALAND, JULES

5350 N.W. 35TH AVENUE

FORT LAUDERDALE, FL 33309

SIGNATURE: ROGER KRUCZYNA P 04/27/2006