

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138224

FILED
Aug 12, 2008
Secretary of State

Entity Name: UNITED OPTICAL DISTRIBUTOR, INC.

Current Principal Place of Business:

9965 MIRAMAR PARKWAY
SUITE 119
MIRAMAR, FL 33025

Current Mailing Address:

9965 MIRAMAR PARKWAY
SUITE 119
MIRAMAR, FL 33025

New Principal Place of Business:

9965 MIRAMAR PKWY
STE 119
MIRAMAR, FL 330252398 US

New Mailing Address:

9965 MIRAMAR PRKWY
STE 119
MIRAMAR, FL 330252398 US

FEI Number: 20-5844790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, DASHIA
9965 MIRAMAR PARKWAY
SUITE 119
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

JUMPING JAX TAX INC
1940 HARRISON ST
STE 306
HOLLYWOOD, FL 330205082 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: JOHN J. MALERBA, PRESIDENT

08/12/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, HOPETON M
Address: 9965 MIRAMAR PARKWAY SUITE 119
City-St-Zip: MIRAMAR, FL 33025

Title: VP (X) Delete
Name: THOMAS, HOPETON M
Address: 9965 MIRAMAR PARKWAY SUITE 119
City-St-Zip: MIRAMAR, FL 33025

Title: S (X) Delete
Name: THOMAS, DASHIA N
Address: 9965 MIRAMAR PARKWAY SUITE 119
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THOMAS, HOPETON M
Address: 9965 MIRAMAR PKWY STE 119
City-St-Zip: MIRAMAR, FL 330252398 US

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: HOPETON M. THOMAS

PD

08/12/2008

Electronic Signature of Signing Officer or Director

Date