2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2009
Secretary of State

DOCUMENT# P06000144692

Entity Name: BRAVO EYE CARE CENTER, INC.

Current Principal Place of Business:

325 MARION OAKS CRSE
OCALA, FL 34473

New Principal Place of Business:

117 MARION OAKS CRSE
OCALA, FL 34473

Current Mailing Address:

325 MARION OAKS CRSE
OCALA, FL 34473

New Mailing Address:

117 MARION OAKS CRSE
OCALA, FL 34473

FEI Number: 22-3947293 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRANO, RAYMOND M.D.
6024 LEMON TREE CT
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

BRAVO, RAYMOND M.D.
117 MARION OAKS COURSE
OCALA, FL 34473 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: RAYMOND BRAVO 03/14/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: BRAVO, RAYMOND DR.
Address: 6024 LEMON TREE COURT
City-St-Zip: TAMPA, FL 33625

Title: VTD ( ) Delete
Name: BRAVO, NINETTE
Address: 6024 LEMON TREE COURT
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: BRAVO, RAYMOND DR.
Address: 117 MARION OAKS COURSE
City-St-Zip: OCALA, FL 34473

Title: VTD (X) Change ( ) Addition
Name: BRAVO, NINETTE
Address: 117 MARION OAKS COURSE
City-St-Zip: OCALA, FL 34473

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: RAYMOND BRAVO PSD 03/14/2009
Electronic Signature of Signing Officer or Director Date