2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 11, 2008 08:00 Al Secretary of State DOCUMENT # P06000145290 NEO-TECH-VISION, INC. Principal Place of Business Mailing Address 14545 SW 270TH ST. 14545 SW 270TH ST. MIAMI, FL 33032 MIAMI, FL 33032 CR2E034 (11/05) No Chg-P 04012008 Applied For 4. FEI Number 20-5921962 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MENA, JESUS I 14545 SW 270TH ST. IN THIS SPACE MIAMI, FL 33032 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent algorature required when reinstating) Signature, typed or printed name of registered agent and title if applicable U00000892210 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 04/23/08-80056-019 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE NAME MENA, JESUS I STREET ADDRESS 14545 SW 270TH ST. CITY-ST-ZIP MIAMI, FL 33032 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #