

PD 7000049178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

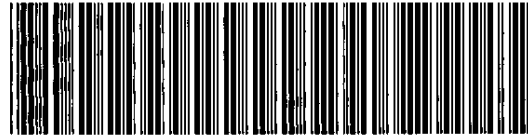
(Business Entity Name)

(Document Number)

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Malave, Erin

From: info@miacorp.com
Sent: Friday, August 06, 2010 11:55 AM
To: CorpAddressChange
Subject: Change of Address Retinal Imaging System

To Whom it May Concern:

*I am requesting a change of principal, mailing, and agent's address for
RETINAL IMAGING SYSTEMS, CORP. Document Number P07000049178
FEI/EIN Number 208898112*

*Old Address:
169 E. FLAGLER STREET
SUITE 1534
MLAMI FL 33131*

*New Address:
20900 NE 30th Avenue
Suite 200,
Aventura, Fl - 33180*

*Atte,
Pedro Faulhaber
Registered Agent
20900 NE 30th Avenue
Suite 200,
Aventura, Fl - 33180*