2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# P07000074140

Entity Name: OCA OPTICAL CORPORATION

Current Principal Place of Business:

5402 NW 72 AVE.
MIAMI, FL 33166

New Principal Place of Business:

5406 NW 72 AVE.
MIAMI, FL 33166

Current Mailing Address:

5402 NW 72 AVE.
MIAMI, FL 33166

New Mailing Address:

5406 NW 72 AVE.
MIAMI, FL 33166

FEI Number: 74-3235332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVE., STE. 125
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: CROITORESCU, ROBERT
Address: 5402 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: VD ( ) Delete
Name: FRIDZON, SONIA
Address: 5402 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: SD ( ) Delete
Name: MORENO, ALLEN
Address: 5402 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: TD ( ) Delete
Name: ESPIN, RAFAEL
Address: 5402 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CROITORESCU, ROBERT
Address: 5406 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: VD (X) Change ( ) Addition
Name: FRIDZON, SONIA
Address: 5406 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: SD (X) Change ( ) Addition
Name: MORENO, ALLEN
Address: 5406 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

Title: TD (X) Change ( ) Addition
Name: ESPIN, RAFAEL
Address: 5406 NW 72 AVE.
City-St-Zip: MIAMI, FL 33166

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: ROBERT CROITORESCU CEO 06/16/2009

Electronic Signature of Signing Officer or Director Date