2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2010
Secretary of State

DOCUMENT# P07000118286

Entity Name: COMPLETE VISION CARE, P.A.

Current Principal Place of Business:

2621 NW 39 ST
BOCA RATON, FL 33434

New Principal Place of Business:

2415 NW 35TH STREET
BOCA RATON, FL 33431

Current Mailing Address:

2621 NW 39 ST
BOCA RATON, FL 33434

New Mailing Address:

2415 NW 35TH STREET
BOCA RATON, FL 33431

FEI Number: 14-2011407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASTELLO, CHRISTOPHER
2621 NW 39 ST
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

CASTELLO, CHRISTOPHER
2415 NW 35TH STREET
BOCA RATON, FL 33431 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: CHRISTOPHER CASTELLO 04/27/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: CASTELLO, CHRISTOPHER
Address: 2415 NW 35TH STREET
City-St-Zip: BOCA RATON, FL 33431

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER CASTELLO PD 04/27/2010
Electronic Signature of Signing Officer or Director Date