2008 FOR PROFIT CORPORATION

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ANNUAL REPORT (AR)

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FLORIDA	EYE CONSULTANTS, INC			08-12-2008 90025 (J36 ***55U.UU	
Principal Plac	e of Business	Mailing Address		\dashv		
		-				
1995 W. NASA BLVD. STE 200		1995 W. NASA BLVD STE 200		V~		
MELBOURNE FL 32904 US		MELBOURNE FL 32904 US				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			490 bem 2429 Miles (1 1429	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		2nd MOORE CR2E03	4 (4/08)	
City & State		City & State		4. FEI Number 59-3395074	4. FEI Number 59-3395074 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current		it Registered Agent		7. Name and Address of New Registered A		
			Name	Name		
SHUMAKE, CHRISTOPHER S 1995 W. NASA BLVD STE 200 MELBOURNE FL 32904			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
			City	FL	Zip Code	
the obligat	named entity submits this statement i ions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am f	amiliar with, and accept	
SIGNATURE .	Significial typed or puried name of registered age.	nt and the stupplicable. (407)	E. Registered Agent signature rece	puriets where reinstating) DATE		
In the said F	ILE NOWIII FEE IS \$550.00	S.607.193(2)(b)	F.S., allows for the waive	er of the \$400 to	· · · · · · · · · · · · · · · · · · ·	
	DUE BY September 3, 2008		king this box, the corpor	ration certifies it	_ +====================================	
	k Payable to Florida Department		prior notice. Fee to file is		Added to Fees	
10.	OFFICERS AND	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 11	
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I hereby cerulty that the information supplied with this filing 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 eath; 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: