2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000084287

Entity Name: COMBINE OPTICAL MANAGEMENT CORP.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7940 N. FEDERAL HWY. 6001 BROKEN SOUND PARKWAY SUITE 200 SUITE 508

BOCA RATON, FL 34487 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

7940 N. FEDERAL HWY. 6001 BROKEN SOUND PARKWAY

SUITE 200 SUITE 508

BOCA RATON, FL 34487 BOCA RATON, FL 33487

FEI Number: 11-2663806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLACHMAN, NEIL

7940 N. FEDERAL HWY.

SUITE 200

BOCA RATON, FL 34487 US

GLACHMAN, NEIL

6001 BROKEN SOUND PARKWAY

SUITE 508

BOCA RATON, FL 33487 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: NEIL GLACHMAN 07/05/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: GLACHMAN, NEIL Name: GLACHMAN, NEIL
Address: 7940 N. FEDERAL HWY. Address: 17888 FIELDBROOK CIRCLE

 Address:
 7940 N. FEDERAL HWY.
 Address:
 17888 FIELDBROOK CIRCLE

 City-St-Zip:
 BOCA RATON, FL 34487
 City-St-Zip:
 BOCA RATON, FL 33496

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: NEIL GLACHMAN PRES 07/05/2007