2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000020538

1. Entity Name

EYE MANAGEMENT, INC.

Principal Place of Business

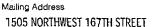
1505 NORTHWEST 167TH STREET SUITE 450

MIAMI, FL 33169

SIGNATURE:



FILED
Apr 28, 2005 08:00 AM
Secretary of State



SUITE 450 MIAMI, FL 33169



04212005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0079163 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

305-614-010

Daytime Phone *

6. Name and Address of Current Registered Agent

BILOWICH, MARTIN 1505 NORTHWEST 167TH STREET 450

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WIAMI, FE 33108			IN THIS STAGE			
8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registerod agent and little	if applicable (NOTE Registered	Agent signatur	e required when reinstaling)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finantifust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	,			
TITLE NAME STREET ADORESS CITY-ST-ZIP	TD KEARNEY, KRISTIN 1505 NORTHWEST 167TH STREET MIAMI, FL 33169				U00000340671 04/28/05-80127-003 150.00	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	PD BILOWICH, MARTIN 1505 NORTHWEST 167TH STREET MIAMI, FL 33169				9.7. M. 99 901E1 000 135.05	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDS WILHELM, CHARLES MD 1505 NW 167 STREET SUITE 450 MIAMI, FL 33169	-		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 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 Statules; 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.