2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P98000023808

Entity Name: OPTOMED, INC.

Current Principal Place of Business:

6303 BLUE LAGOON DRIVE
SUITE 170
MIAMI, FL 33126

New Principal Place of Business:

1936 N.W. 79TH AVE.
MIAMI, FL 33126 US

Current Mailing Address:

6303 BLUE LAGOON DRIVE
SUITE 170
MIAMI, FL 33126

New Mailing Address:

1936 N.W. 79TH AVE.
MIAMI, FL 33126 US

FEI Number: 65-0842656 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUIZ, ELISEO
6303 BLUE LAGOON DR. SUITE 170
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

DI TOMAS, EDUARDO A MR.
1936 N.W. 79TH AVE.
MIAMI, FL 33126 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: EDUARDO A. DI TOMAS 04/30/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RUIZ, ELISEO
Address: 733 N SHORELINE BLVD
City-St-Zip: MOUNTAIN VIEW, CA 94043

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DI TOMAS, EDUARDO A MR.
Address: 1936 N.W. 79TH AVE.
City-St-Zip: MIAMI, FL 33126 US

Title: D ( ) Change (X) Addition
Name: GAUNA, CRISTINA I MRS.
Address: 1936 N.W. 79TH AVE.
City-St-Zip: MIAMI, FL 33126 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDUARDO A. DI TOMAS D 04/30/2002
Electronic Signature of Signing Officer or Director Date