## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #** P98000062098 1. Entity Name

STERLING VISION OF ORLANDO, INC.

Principal Place of Business

Mailing Address

1500 HEMPSTEAD TURNPIKE EAST MEADOW NY 11554

1500 HEMPSTEAD TURNPIKE EAST MEADOW NY 11554

**FILED** Jul 29, 2002 8:00 am Secretary of State 07-29-2002 90005 005 \*\*\*550.00



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2. Principa	I Place of Business	3. Mailing Address						
1 1/26 6		٠ . ا د	100 Quentin Roosevell Blud		. : marioat 110 10501 10111 60111 001115 1	iann a <b>dhit a</b> iria il <b>a</b> in <b>40</b>	ILU FOLUE (OS) (20)	
		Suite, Apt. #, etc.	Suite Ant # etc					
_Suite 508		Suite 508	Suite Fra		DO NOT WRITE	IN THIS SPACE		
City & St		City & State						
1 ^ -	encitu NY	16 1	MISC	- 4	I. FEI Number		Applied For	
Žip	Country	Gardencity	107		11-3448218		Not Applicable	
11530	D   ÜSÄ	Zip	Country		. Certificate of Status Desired	□ \$8.75 A	dditional	
11000	6. Name and Address of Curre	11530	<u>Usa</u>			Fee Requi	red	
	o. Name and Address of Curre	Int Registered Agent		7	. Name and Address of New Regi	stered Agent		
Ditte			Name	Name				
DEUMBE	RGEXCELSIOR CORPORATE SEI	RVICES, INC.	Character	Charlet II (D.C. D. )				
4435 OL	D WINTER GARDEN ROAD		Street	Street Address (P.O. Box Number is Not Acceptable)				
ORLANDO: FL 32811			}					
	£							
	. :		City			Zin Co		
A TI .					_	FL   Zip Co	ae	
B. The abov	e named entity submits this statement	t for the purpose of changing its r	egistered office of	or registered :	agent, or both, in the State of Florids		<del></del>	
				•	and the second in the ottate of Fioring	1.		
SIGNATURE								
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered Agent signa	ture required who	voice(Nine)			
- T:					Trenslating)	DATE		
9. Inis corp	oration is eligible to satisfy its Intangib		FEE IS \$150.	.00				
After May 1,			)2 Fee will be \$550.00		10. Election Campaign Financ		00 May Be	
(366 CHE	eria on back)	Make Check Payable	to Departmen	t of State	Trust Fund Contribution.		d to Fees	
11,	OFFICERS AN	ID DIRECTORS	12.		DDITIONS (SUMMOSS TO OFFICE			
TITLE	CEO	Delete		TCEO IC	DDITIONS/CHANGES TO OFFICER		RS IN 11	
NAME	MCLEENEY, MICHAEL	C Delete	TITLE		ecretary	Change	☐ Addition	
STREET ADDRESS	1500 HEMPSTEAD TPKE		NAME	Christ	opher Payan			
CITY-ST-ZIP	EAST MEADOW NY 11554		STREET ADDRESS		Ihir Avenue		1	
			CITY-ST-ZIP	NewH	ude Park, NY 110	40	į	
TITLE	P	□ Delete	TITLE	Co -C .	3.0	Change	☐ Addition	
NAME	SHASHATI, NICHOLAS		NAME		el Herskowitz	Ca change	L Augulon	
STREET ADDRESS	12228 BRANICOLE LANE		STREET ADDRESS	82-00	Chevy Chase Street		ľ	
CITY-ST-ZIP	SAN DIEGO CA 90129	*_	CITY-ST-ZIP	10000			{	
TITLE	-VP	Delete	TIZE C		Ca, MY 11432	<del></del>		
NAME -	TARMAN, PAUL	C3 Delete	TITLE	Co-C.		Change	☐ Addition	
STREET ADDRESS	155 HEMPSTEAD DRIVE		NAME	Myles!			į	
CITY-ST-ZIP	BLOOMINGDALE IL 60108	i	STREET ADDRESS	JOIT V	V. Melinda Ln.			
7171 5			CITY-ST-ZIP	Glend	ale AZ 85308		ı	
TITLE NAME	VPF	Delete	TITLE	Chairn	ran of the Board	Change	Addition	
	PAPADOPOULOS, GEORGE		NAME	Alan (	Johen O.D.	FEI Aumilie	Addition	
STREET ADDRESS	8600 BOULEVARD EAST 5F		STREET ADDRESS	3 Sucre	y Lane			
CITY-ST-ZIP	NORTH BERGEN NJ 07047	ľ	CITY-ST-ZIP .	DIA 144		m		
TITLE	S	Delete	TITLE	Director	25100ry, NY 1156			
NAME	SILVER, JOSEPH	rai pelete					☐ Addition	
STREET ADDRESS	12 SOUTH DR				Cohen O.D.		1	
CITY-ST-ZIP	GREAT NECK NY 11021				ward hane		1	
TITLE			CITY-ST-ZIP	Quan.	e NY 11959	1		
1		□ Delete	TITLE	Direct	20	Change	Addition	
NAME					nf. Stasior	Cal Olleride	☐ Worldings	
STREET ADDRESS		ı	STREET ADDRESS	2670 F	Calle Books D-	. Acora	J	
CITY-ST-ZIP			CITY-ST-ZIP	30 IU F	Calle Puerta Day	ncero	ļ	
3. I hereby co	ertify that the information supplied with	this filling does not qualify for the		10200U	1,AZ 85718			
indicated of	ertify that the information supplied with on this report or supplemental report is oration or the receiver or trustee empore	s true and accurate and that my s	exemption state	d in Section	119.07(3)(i), Florida Statutes. I furthe	er certify that the in	formation	
changed r	oration or the receiver or trustee empor or on an attachment with an address, we	owered to execute this report as r	equired by Chap	ter 607, Flori	egal effect as it made under oath; the day of the state of the same area.	nat I am an officer o	or director	
	an attachment with an address, t	with all other like empowered.			appe	sale to DIOCK 11 Or	BIOCK 12 If	

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

<u>516-390-2193</u> Date