

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000103799

Entity Name: OPTICALLY YOURS, INC.

FILED  
Apr 28, 2010  
Secretary of State

**Current Principal Place of Business:**

11773 US HWY 441  
BELLEVIEW, FL 34420

**New Principal Place of Business:**

**Current Mailing Address:**

11773 US HWY 441  
BELLEVIEW, FL 34420

**New Mailing Address:**

FEI Number: 59-3541360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERNANDEZ, CATHERINE L  
6151 SE 126TH STREET  
BELLEVIEW, FL 34420 US

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

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HERNANDEZ, CATHERINE L  
Address: 6151 SE 126TH STREET  
City-St-Zip: BELLEVIEW, FL 34420

Title: VD  
Name: HERNANDEZ, RAMONA  
Address: 5145 SE 108TH STREET  
City-St-Zip: BELLEVIEW, FL 34420

Title: TD  
Name: HERNANDEZ, HENRY  
Address: 5145 SE 108TH STREET  
City-St-Zip: BELLEVIEW, FL 34420

Title: SD  
Name: LUNSFORD, PHYLLIS L  
Address: 6151 SE 126TH STREET  
City-St-Zip: BELLEVIEW, FL 34420

I hereby 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 all other like empowered.

SIGNATURE: CATHERINE L HERNANDEZ

PRES

04/28/2010

Electronic Signature of Signing Officer or Director

Date