

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S21472

Entity Name: VISUAL EYES, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

333 PLAZA REAL
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

333 PLAZA REAL
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0238228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEPPER, WAYNE P.
333 PLAZA REAL
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

STENE, KAREN M CEO
333 PLAZA REAL
BOCA RATON, FL 33432 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: KAREN M. STENE

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TEPPER, WAYNE P.,
Address: 333 PLAZA REAL
City-St-Zip: BOCA RATON, FL

Title: D (X) Delete
Name: FAHEY, PETER,
Address: 333 PLAZA REAL
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STENE, KAREN M CEO
Address: 333 PLAZA REAL
City-St-Zip: BOCA RATON, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KAREN M. STENE

CEO

01/04/2005

Electronic Signature of Signing Officer or Director

Date