



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000116130

2. Name of Corporation Medical Eye Services, Inc.

3. Street Address Principal Business Office:

No. and Street: 345 BAKER STREET

City or Town: COSTA MESA State: CA Zip: 92626 Country: USA

4. Business Phone No.

714-619-4660

5. State of Incorporation

State: CA

6. Brief Description of the Character of Business Conducted in Rhode Island

THIRD PARTY ADMINISTRATION OF ROUTINE VISION CARE PLANS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CFO	CHUCK KUPFER	345 BAKER ST COSTA MESA, CA 92626 USA
DIRECTOR	ROBERT BJORKQUIST	155 CHRISTOPHER DR SAN FRANCISCO, CA 94131 USA
ASSIST TREAS/DIR	KEITH RENKEN	225 SHARON RD ARCADIA, CA 91007 USA
VICE CHAIR/DIR	DONALD Y LESSER, M.D., J.D.	2516 SAMARITAN DR SAN JOSE, CA 95124 USA
DIRECTOR	PAUL T URREA, M.D.	850 S ATLANTIC AVE #301 MONTEREY PARK, CA 91754 USA
CHAIR/DIR	RENNY THOMAS, SR	56 SAN FERNANDO RANCHO MIRAGE, CA 92270 USA
SECRETARY	SYLVIA L URBANIEC	345 BAKER ST COSTA MESA, CA 92626 USA
DIRECTOR	RONALD FOLTZ, M.D.	1000 FOWLER WAY #2 PLACERVILLE, CA 95667 USA
DIRECTOR	DENNIS METAS	302 SYCAMORE VALLEY RD DANVILLE, CA 94526 USA
DIRECTOR	CARTER SHRUM	7701 FAY AVE LA JOLLA, CA 92037 USA
DIRECTOR	MICHAEL TIERNAN	1225 SAN CARLOS AVE SAN CARLOS, CA 94070 USA
CEO/PRES/DIR	ASPASIA SHAPPET	345 BAKER ST COSTA MESA, CA 92626 USA
ASSIST SEC/DIR	LAWRENCE LONN, M.D.	75 WESTSHORE RD BELVEDERE, CA 94920 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
PNP		\$0.00	100,000.00	0
CNP		\$0.00	1,000,000.00	170064

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 22 Day of December, 2010 at 1:40:25 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SYLVIA L. URBANIEC
Signature of Authorized Representative of the Corporation

SECRETARY

Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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