

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **677309** (7)

1. Corporation Name
HALLANDALE OPTICAL CO. INC.



Principal Place of Business: **C/O PURITZ & WEINTRAUB 1244 N UNIVERSITY BLVD PLANTAION FL 33322-4724**
Mailing Address: **C/O PURITZ & WEINTRAUB 1244 N UNIVERSITY BLVD PLANTAION FL 33322-4724**

3. Date Incorporated or Qualified: **06/30/1980**
3a. Date of Last Report: **03/14/1995**
4. FEI Number: **59-2026401**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country
26. Mailing Address
27. Suite, Apt. #, etc.
28. City & State
29. Zip
30. Country

g. Name and Address of Current Registered Agent

**PURITZ & WEINTRAUB
1244 N UNIVERSITY BLVD
PLANTATION FL 33322**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed in block of high-contrast type and that of agent (if different). Registered Agent Signature required when filing this report. DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BROWN, RONALD	
STREET ADDRESS	24 DUCHY ROAD	
CITY - ST - ZIP	HERTFORDSHIRE, ENGLAND	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, DOREEN ADELE	
STREET ADDRESS	24 DUCHY ROAD	
CITY - ST - ZIP	HERTFORDSHIRE, ENGLAND	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, JEREMY	
STREET ADDRESS	6 SHERIDAN LODGE CHASE	
CITY - ST - ZIP	LONDON, ENGLAND	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY - ST - ZIP	

**MR BROWN Jeremy
BACONFIELD COTTAGE,
TOTTERIDGE GREEN LONDON N20 8PD ENGLAND**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment to an address.

SIGNATURE: Ronald Brown Date: June 26 96.

CR2E034 (12/95)