# FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

> Secretary of State DIVISION OF CORPORATIONS

# **FILED** Apr 21 1998 8:00am Secretary of State

DOCUMENT # F9500005992 (1) ESSILOR TECHNOLOGIES OF AMERICA, INC.					######################################	
Principal Place of Business Mailing Address					98181 81418 18158 FR148 1181 1881	
477 COMMERCE BLVD 47		477 COMMERCE BLVD				
OLDSMAR FL 34677 OI		OLDSMAR FL 34677		DO NOT WOITE IN TO	UP PDAGE	
US		US		DO NOT WRITE IN TH	IIS SPACE	
				12/08/1995		
2. Principal P	lace of Business	2e. Mailing Address		4. FEI Number	Applied For	
21		26		59-3294787	Not Applicable	
		Suite, Apt. #, etc.			\$8.75 Additional	
22	27			5. Certificate of Status Desired XXX	Fee Required	
City & State	В	City & State		6. Election Campaign Financing	\$5.00 May Be	
<b>Zip</b>	Country	Z <sub>I</sub> p	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	Yes XXXNo	
	9. Name and Address of Current	<del></del>	, J	10. Name and Address of New Register		
C T CORPORATION SYSTEM 81 Name						
4000 COLITIL DINE IOLAND DOAD			82 Street	t Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33324			<u> </u>		·	
			83			
			84 City		- 85 Zip Code	
					L 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 name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling)  DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	DS	DELETE	1.1 TITLE	SEE STATEMENT 1	Change	
NAME	D'ORVAL, CYRIL L.		1.2 NAME	Caro	*****	
STREET ADDRESS	2400 118TH AVE N		1.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33716		1.4 CiTY-ST-ZiP			
TITLE	D	☐ DELETE	2.1 TITLE	SEE STATEMENT 1	Change Addition	
NAME	STOERR, JACQUES		2.2 NAME			
STREET ADDRESS	2400 118TH AVE N		2.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33716	DELETE	2. 4 CITY - ST - ZIP	CPP OTATOLICAT 1	XXX hange Addition	
NAME	PIERRE, ALAINE	C) perset	3.1 TITLE 3.2 NAME	SEE STATEMENT 1	ANA HANGE L. AUGILLOSI	
STREET ADDRESS	2400 118TH AVE N		3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33718		3.4. CITY-ST-ZIP			
TITLE	P	DELETE	4.1 TITLE	SEE STATEMENT 1	Change Addition	
NAME	TEETERS, DANIEL J		4. 2 NAME	SEE SIMIEMENT I		
STREET ADDRESS	477 COMMERCE BLVD		4.3 STREET ADDRESS			
CITY-ST-ZIP	OLDSMAR FL		4.4 CITY - ST - ZIP			
TITLE	VCF0	☐ DELETE	5.1 TITLE	SEE STATEMENT 1	☐ Change ☐ Addition	
NAME	SCHON, JONE		\$.2 NAME			
STREET ADDRESS	2400 118TH AVE N.		5.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL	Therese	5 4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME CYDEST ADDRESS			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY+ST-ZIP 14. I hereby o	certify that the information supplied with	n this filing does not qualify for	6.4 CITY - ST - ZIP or the exemption state	l ed in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information	

## ESSILOR TECHNOLOGIES OF AMERICA, INC

### **Officers**

#### **Directors**

Dan Teeters 477 Commerce Blvd. Oldsmar, FL 34677

2400 118<sup>th</sup> Avenue North St. Petersburg, FL 33716

Cyrille D'Orval 147 Rue de Paris 94227 Charenton, France Cyrille D'Orval 147 Rue de Paris

Jacques Stoerr

94227 Charenton, France

Joni Schon 2400 118th Avenue North St. Petersburg, FL 33716 Alaine Pierre 147 Rue de Paris

94227 Charenton, France