Apr 20, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000088804

TITLE

NAME

STREET ADDRESS

City & State City & State City & State City & State State City & Ci	 Corporation 						i		
Principal Place of Business Mailing Address BOCA RATON FL 33433 BERDIANA DR BOCA RATON FL 33433 BERD	Librae (OPTICAL, INC.							
Principal Place of Business Mailing Address BOCA RATON FL 33433 BOCA RATON FL 3343							L SERVICE DE LA COMPANION DE L		
2253 LERIQIANA DR BOCA RATON FL 33433 DO NOT WRITE IN THIS SPACE									
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11/17/1995								<u> </u>	
2. Principal Place of Business 2a, Malling Address 65-0623970 No. Applied For School Appl. IV, etc. 28 Suite, Apt. IV, etc. 27 Cly & State 28 Suite, Apt. IV, etc. 27 Cly & State 28 Suite, Apt. IV, etc. 27 Cly & State 28 Suite, Apt. IV, etc. 29 Country 6. Election Campaign Financing \$5.00 May Be Added to Fees Required 28 Suite, Apt. IV, etc. 29 Suite, Apt. IV, etc. 29 Country 6. Election Campaign Financing \$5.00 May Be Added to Fees Required 29 Suite Suite, Apt. IV, etc. 29 Suite Suite, Apt. IV, etc. 29 Suite Suite, Apt. IV, etc. 29 Suite, Apt. IV, etc. 20 Suite, Apt. IV, etc. 29 Suite, Apt. IV, etc. 20 Suite, Apt. IV, etc. 2		•					•		
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25		Country.		Cou	untry	_		ntangible	
9. Name and Address of Current Registered Agent LIBRAE, STACEY 22553 MERIDIANA DR. B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) B4 City			⊢		•		1 2		□No
LIBRAE, STACEY 22553 MERIDIANA DR. BOCA RATON FL 33433 84 City FL 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 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, 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the corporation submits this statement for the purpose of changing its registered agent, and the corporation submits this statement for the purpose of changing its registered agent, and the corporation submits this statement for the purpose of changing its registered agent, and the corporation submits this statement for the purpose of changing its registered agent, and the corporation submits this authorise appointment as registered agent, and the corporation s	2-4			1=-1			10. Name and Address of New Registere	Agent	
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### RECARATION FL 33433 ### City FL 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 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, and from the purpose of changing its registered agent, and from the purpose of changing its registered agent, and remains of registered agent, and the # applicable. (NOTE: Registered Agent signature required when reinstating) ### City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the provision of Sections 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and for the provision of Sections 607,0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and for the provision of the purpose of changing its registered agent and statutes, the corporation submits this statement for the purpose of changing its registered agent and statutes, the corporation submits this statement for the purpose of changing its registered agent and statutes, the corporation submits distance. #### City ###	LIBRAE, STACEY					Street Adr	dress (P.O. Box Number is Not Acceptable)		
### City ###						Oli Cot Alac			
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 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 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, hyper or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	BOCA RATON FL 33433				83				
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 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 and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, hyper or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					94	City		85 7in	Code
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 chapted, or on agrattachment with an address, with all other like empowered.

6.2 NAME

8.3 STREET ADDRESS

6.4 CITY-ST-ZIP