

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000093766

1. Entity Name
ADONIS OPTICAL, INC.



Principal Place of Business

3720 N.W. 43RD STREET
STE 104
GAINESVILLE, FL 32606 US

Mailing Address

3720 N.W. 43RD STREET
STE 104
GAINESVILLE, FL 32606 US

FILED
Mar 18, 2004 08:00 AM
Secretary of State



01052004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3543331

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WIEBOLD, JONATHAN D
3720 N.W. 43RD STREET
SE 104
GAINESVILLE, FL 32606

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	WIEBOLD, LISA D
STREET ADDRESS	3720 NW 43RD STREET, SUITE 104
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	VD
NAME	WIEBOLD, JONATHAN
STREET ADDRESS	3720 NW 43RD STREET, SUITE 104
CITY-ST-ZIP	GAINESVILLE, FL 32606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000032193
03/18/04-80039-015 150.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jonathan D Wiebold Jonathan D Wiebold, Director

Mar 16, 2004

352-367-0077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #