

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H01040

**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC8061211803**

**Entity Name:** INVERRARY OPTICAL, INC.

**Current Principal Place of Business:**

INVERRARY OPTICAL, INC.  
2000 N FEDERAL HWY STE 100  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

INVERRARY OPTICAL, INC.  
2000 N FEDERAL HWY STE 100  
POMPANO BEACH, FL 33062 US

**FEI Number:** 59-2402550

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOULD, LAWRENCE M.  
1614 SE 5TH COURT  
DEERFIELD BEACH, FL 33441 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name GOULD, LAWRENCE M.  
Address 1614 SE 5TH CT  
City-State-Zip: DEERFIELD BEACH FL 33441

Title VD  
Name GOULD, CYNTHIA C.  
Address 1614 SE 5TH CT  
City-State-Zip: DEERFIELD BEACH FL 33441

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAWRENCE M GOULD

**OWNER**

**01/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date