

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L80988

**Entity Name:** A BETTER BLIND, INC.

**Current Principal Place of Business:**

5350 NW 165TH ST  
HIALEAH, FL 33014

**Current Mailing Address:**

5350 NW 165TH ST  
HIALEAH, FL 33014 US

**FEI Number:** 65-0198345

**Certificate of Status Desired:** Yes

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

GEBARA, MYRIAM  
5350 NW 165 STREET  
MIAMI, FL 33014 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           PTD  
Name           GEBARA, MYRIAM  
Address        5350 NW 165 STREET  
City-State-Zip: MIAMI FL 33014

Title           SD  
Name           GEBARA, ROBERT  
Address        16201 N.W. 49TH AVENUE  
City-State-Zip: MIAMI FL

*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:** MYRIAM GEBARA

**PRESIDENT**

**03/16/2016**

Electronic Signature of Signing Officer/Director Detail

Date