

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000017576

**Entity Name:** TECHNI EYE INC.

**Current Principal Place of Business:**

140 OSCAR HILL RD.  
SUITE 14  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

18106 PEREGRINES PERCH PL.  
SUITE 301  
LUTZ, FL 33558 US

**FEI Number:** 22-3921386

**Certificate of Status Desired:** No

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

NOUEL, GUSTAVO APTD  
140 OSCAR HILL RD.  
SUITE 14  
TARPON SPRINGS, FL 34689 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           NOUEL, GUSTAVO  
Address        140 OSCAR HILL RD.  
                  SUITE 14  
City-State-Zip: TARPON SPRINGS FL 34689

Title           AUTHORIZED REPRESENTATIVE  
Name           BARNOLA, MARIA E  
Address        140 OSCAR HILL RD.  
                  SUITE 14  
City-State-Zip: TARPON SPRINGS FL 34689

Title           VC  
Name           NOUEL, JENNIFER A  
Address        140 OSCAR HILL RD.  
                  SUITE 14  
City-State-Zip: TARPON SPRINGS FL 34689

*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:** GUSTAVO NOUEL

**PRESIDENT**

**01/04/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date