Name and Address of Current Registered Agent:			
A INC MABRY HWY :14 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.			
: ROSA QUINTELA			02/11/2021
Electronic Signature of Registered Agent			Date
tor Detail :			
Ρ	Title	VP	
SELDIN, JAMES E	Name	CHARLAND, DONNA	
22629 SOUTH SHORE DRIVE	Address	22629 SOUTH SHORE DRIVE	
LAND O'LAKES FL 34639	City-State-Zip:	LAND O'LAKES FL 34639	
т			
SELDIN, SUZANNAH R			
1208 E CHELSEA ST			
TAMPA FL 33603			
	AINC MABRY HWY 14 US entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits this statement for the purpose of changing its regist entity submits the purpose of changing i	ANC MABRY HWY 14 US entity submits this statement for the purpose of changing its registered office or regist entity submits this statement for the purpose of changing its registered office or regist Electronic Signature of Registered Agent Electronic Signature of Registered Agent tror Detail : P Title SELDIN, JAMES E Name 22629 SOUTH SHORE DRIVE Address LAND O'LAKES FL 34639 City-State-Zip: T SELDIN, SUZANNAH R 1208 E CHELSEA ST	NNC MABRY HWY 14 US entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flo : ROSA QUINTELA Electronic Signature of Registered Agent tor Detail : P Title VP SELDIN, JAMES E Name CHARLAND, DONNA 22629 SOUTH SHORE DRIVE Address 22629 SOUTH SHORE DRIVE LAND O'LAKES FL 34639 City-State-Zip: LAND O'LAKES FL 34639 T SELDIN, SUZANNAH R 1208 E CHELSEA ST

**Current Mailing Address:** 22629 SOUTH SHORE DRIVE

LAND O LAKES. FL 34639

DOCUMENT# P96000074753

Entity Name: WIZARD OF EYES, INC.

**Current Principal Place of Business:** 

## FEI Number: 59-3402300

22629 SOUTH SHORE DRIVE LAND O LAKES, FL 34639

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: JAMES EDWARD SELDIN

Electronic Signature of Signing Officer/Director Detail

02/11/2021

## FILED Feb 11, 2021 **Secretary of State** 3661922153CC

Certificate of Status Desired: No

## 2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Date