

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000007230

**Entity Name:** SUPERIOR OPTICAL LABS, INC.

**Current Principal Place of Business:**

6525 SUNPLEX DRIVE  
OCEAN SPRINGS, MS 39564

**Current Mailing Address:**

PO BOX 1290  
OCEAN SPRING, MS 39564

**FEI Number:** 64-0807765

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** DAVID J. MILAN

03/20/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR / PRESIDENT  
Name COLUCCI, ROBERT M  
Address 13515 N. STEMMONS FREEWAY  
City-State-Zip: DALLAS TX 75234

Title DIRECTOR  
Name NUSSBAUMER, STEVE  
Address 13555 N. STEMMONS FRWY  
City-State-Zip: DALLAS TX 75234

Title DIRECTOR  
Name GADD, RICK  
Address 13555 N. STEMMONS FRWY  
City-State-Zip: DALLAS TX 75234

Title SECRETARY  
Name MILAN, DAVID J.  
Address 13555 N. STEMMONS FRWY  
City-State-Zip: DALLAS TX 75234

*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:** DAVID J. MILAN

**SECRETARY**

03/20/2017

Electronic Signature of Signing Officer/Director Detail

Date