

FILE NOW: FILING FEE AFTER MAY 1 IS \$550

FILED
May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT STATE Sandra B. Moran Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 485898 (1)

1. Corporation Name
J & R SUNGLASSES, INC.



Principal Place of Business 1100 N.W. 53RD ST. FT LAUDERDALE FL 33309	Mailing Address 1100 N.W. 53RD ST. FT LAUDERDALE FL 33309-3169
--	---

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Copy	

3. Date Incorporated or Qualified 09/16/1975	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1622309	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MCNULTY, J. P.
 1100 NW 53 ST
 FT LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

1. Name
 2. Street Address (P.O. Box Number is Not Acceptable)
 3.
 4. City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOT) Registered agent's signature required when reappointing.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	P MCNULTY, JAMES P., JR. 1100 NW 53 ST FT LAUDERDALE FL	1.2	
		1.3 STREET ADDRESS	
		1.4 CITY - ST - ZIP	
		2.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		2.2	
		2.3 STREET ADDRESS	
		2.4 CITY - ST - ZIP	
		3.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
		4.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2	
		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	
		5.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2	
		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
		6.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2	
		6.3 STREET ADDRESS	
		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *x [Signature]* **x 4/28/97 x 954-441-1263**

CR2E034 (9/96)