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FLORIDA DEPARTMENTSTATE

PROFIT

SIGNATURE:

May 02 1997 8:00am CORPORATION Sandra B. Mor ANNUAL REPORT Secretary of State Secretary of St DIVISION OF CORPOJONS 1997 DOCUMENT # (1)485898 J & R SUNGLASSES, INC. Principal Place of Business Mailing Address 1100 N.W. 53RD ST. 1100 N.W. 53RD ST. FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309-3169 3a. Date of Last Report 3. Date incorporated or Qualified 05/01/1996 09/16/1975 Applied For 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Not Applicable 59-1622309 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 8. This corporation has liability for intangible tax under s. 199.032, Cory Zip Country $Z_{\rm IP}$ Lyes 🔲 No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCNULTY, J. P. 1100 NW 53 ST Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33309 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ve-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 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 States. SIGNATURE DATE Signature, typed or printed name of registered agent and tille it applicable. gent signature required when re-ustating) (NOTI Registro ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Addition Change DELE1E TITLE MCNULTY, JAMES P., JR. NAME 1100 NW 53 ST STREET ADDRESS E1 ADDRESS FT LAUDERDALE FL CITY-ST-ZIP ST-ZIP Change Addition DELETE TITLE NAME STREET ADDRESS LADDRESS CITY-ST-ZIP \$1-2IP ☐ Change Addition DELETE TITLE NAME STREET ADDRESS T ADDRESS CITY-ST-7IP ST-ZIP Addition Change DELETE TITLE NAME STREET ADDRESS £1 ADDRESS CITY-ST-ZIP - ST - 7IP Addition DELETE TITLE 5.1 NAME STREET ADDRESS 5.3 RELT AUDRESS CITY-ST-ZIP 54 QLY-51-21P ☐ Change Addition TITLE DELETE 613/10 NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIE 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 early that I am an officer or director of the comparation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

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1/28/97 ×954-441-1263