

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Jul 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 559818 (0)
1. Corporation Name
20-20 OPTICAL CORP.



Principal Place of Business
9068 BISCAYNE BLVD
MIAMI SHORES FL 33138

Mailing Address
9068 BISCAYNE BLVD
MIAMI SHORES FL 33138

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 NONE		26 1850 BAY DR.		02/15/1978		05/01/1996	
22 Suite, Apt. #, etc.		27 MIAMI		4. FEI Number		Applied For	
23 City & State		28 MIAMI BEACH FL		59-1797161		Not Applicable	
24 Zip		29 33141		5. Certificate of Status Desired		8.75 Additional Fee Required	
25 Country		30 USA		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

STEVENS, JACK
9068 BISCAYNE BLVD
MIAMI BCH FL 33138

81 Name STEVENS, JACK
82 Street Address (P.O. Box Number is Not Acceptable) 1850 BAY DRIVE
83
84 City MIAMI BEACH FL 85 Zip Code 33141

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 [Signature] DATE 7/22/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRESIDENT
NAME	STEVENS, JACK	1.2 NAME	JACK STEVENS
STREET ADDRESS	9068 BISCAYNE BLVD	1.3 STREET ADDRESS	1850 BAY DRIVE
CITY-ST-ZIP	MIAMI SHORES FL	1.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE		2.1 TITLE	VICE PRESIDENT
NAME		2.2 NAME	MERRY MARTIN
STREET ADDRESS		2.3 STREET ADDRESS	1850 BAY DRIVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

CR2E034 (4/97)