FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 600407

(1)

DR. SHELDON MAYER, OPTOMETRIST, P.A.

Principal Place of Business

SIGNATURE:

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

214 HOLLYWOOD MALL HOLLYWOOD FL 33021 214 HOLLYWOOD MALL HOLLYWOOD FL 33021-6902 FILED
Jan 27 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified

07/30/1968

3a. Date of Last Report

05/01/1996

2. Principal Place of Business		Za. Mailing Addr	2a. Mailing Address			4. FEI Number	LIA	pplied For	
21		26	26			59-1217185	N(ot Applicable	
, Suite, Apt. #, etc		Suite, Apt. #,	Suite, Apt. #, etc.				\$8.75	Additional	
22		27	27			5. Certificate of Status Desired		equired	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23 28						Trust Fund Contribution		to Fees	
Zip	Country	Zip	Co	untry		8. This corporation has liability for intangible	e tax under s	s. 199.032,	
24 25 29 30						Florida Statutes X Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
MAYER, SHELDON					81 Name				
214 HOLLYWOOD MALL				82 Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWOOD FL 33021				Shoet Addless (F.O. Box Number is Not Acceptable)					
				83					
,				84	City	FI	85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the al				bov	e-named corn			ts registered	
office or registr	ered agent, or both, in the Stat	e of Florida, Such char	ge was authorize	ed by	the corporati	ion's board of directors. I hereby accept the ap	pointment as	registered	
agent. I am far	miliar with, and accept the obli-	gations of, Section 607.	.0505, Florida Sta	atutes	S.				
SIGNATURE	Suc Type the provides a collective deed to	and the state of t	# OTE Description	and Arre	ot simply to soo its	ed when reinstating) DATE			
12.		ND DIRECTORS	13.		art signature radum	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	PS IN 12	
TITLE PO				IITLE		ADDITIONO/OFFININGED TO OFFICERS AS	Change	Addition	
1111	AYER, SHELDON			NAME		·	C. C. C. C. G.	RS IN 12	
24	4 HOLLYWOOD MALL								
SINCE PRODUCESS UP	OLLYWOOD FL				ADDRESS				
CITT-31-2IF	JULI 1100D I L	- In		CITY-S	T-ZIP	<u></u>	T Ober	Addition	
DIFEE.	FF, WALLACE	[] DI		TITLE			Change	Addition	
			2.21	NAME	}				
	4 HOLLYWOOD MALL		2.3 (STREET	ADDRESS	**			
Unit-31-14	DLLYWOOD FL				ST-ZIP				
TITLE D		Di	ELETE . 3.1	TITLE	}		Change	Addition	
	EGEL, JERRY		3.24	name	l				
	UDERDALE MALL		3.3	STREET	ADDRESS				
C!TY-ST-ZIP	UDERHILL FL		3.4	CITY-	ST-ZIP			_	
TITLE		D	ELETE 4.1	TITLE			☐ Change	Addition	
NAME			4 2	NAME	1				
STREET ADDRESS			435	STAEET	ADDRESS				
CITY-ST-ZiP			4.41	CITY - S	ST - ZiP	•			
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D		TITLE			Change	Addition	
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS			·	
CITY - ST - ZIP				CITY-5					
TITLE		D		TITLE		····	☐ Change	Addition	
NAME		_		NAME	}		_ •	_	
STREET ADDRESS					ADDRESS				
1				CITY - 9					
CITY-S1-ZIP	orlify that the information surrol	ed with this filing doce				in Section 119.07(3)(i), Florida Statutes. I furth	er certify the	t the	
information inc	ficated on this armual report or	supplemental annual r	report is true and	acci	urate and that	my signature shall have the same legal effect	as if made ur	nder oath; that	
Fam an officer appears in Blo	r or director of the corporation i ock 12 or Block 13 if charged,	or the receiver or truste or on an aftachment wi	ee empowered to ith an address.	exec	cute this repor	t as required by Chapter 607, Florida Statutes;	and that my	name	