

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 AM
Secretary of State

DOCUMENT # 630248

1. Entity Name
COVE OPTICAL COMPANY



Principal Place of Business
**COVE SHOPPING CENTER
1609 SE 3RD CT
DEERFIELD BEACH FL 33441**

Mailing Address
**3940 NE 31ST AVE
LIGHTHOUSE POINT, FL 33064 US**



01162008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1926328

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BRUNO, ANDREW F
3940 NE 31ST AVE
LIGHTHOUSE POINT, FL 33064**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BRUNO, ANDREW F
STREET ADDRESS	3940 NE 31ST AVE
CITY- ST- ZIP	LIGHTHOUSE PT FL.,
TITLE	S
NAME	BRUNO, FRANCES
STREET ADDRESS	3940 N. E. 31 AVENUE
CITY- ST- ZIP	LIGHTHOUSE PT FL.,
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000859496
04/02/08-80025-009-150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Frances Bruno* **Frances Bruno**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/08 954 427-6363

Date

Daytime Phone #