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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F50381

(5)

Mailing Address

EYE TO EYE OPTICAL CENTER, INC.

FILED Feb 27 1997 8:00am Secretary of State



10125 WEST OAKLAND PARK BLVD SUNRISE FL 33351		10125 WEST OAKLAND PA SUNRISE FL 33351-6917	10125 WEST OAKLAND PARK BLVD Sunrise FL 33351-6917			
				3. Date Incorporated or Qualified 10/21/1981	3a. Date of Last R 01/22/1996	eport
2. Principal F	lace of Business	2a. Mailing Address		4. FEI Number 59-2140628	Ar	pplied For
21		26			No	ot Applicable
Suile, Apt. #, etc 22		Suite, Apt. #, etc.	27		\$8.75 Additional Fee Required	
City & Stal	lo	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zιρ	Country	Zip	Country	8. This corporation has liability for		. 199.032,
24	25]	29	30	7.0.100	Yes No	
	9. Name and Address of C	urrent Registered Agent	81 Name	10. Name and Address of New R	agistered Agent	
	NTZ, STEVEN		oi Name			
	125 W OAKLAND PARK BLVI NRISE FL 33351	,		Address (P.O. Box Number is Not Accepta	ble)	
			83			
			84 City			Code
office or agent 1 a	to the provisions of Sections 60. registered agent, or both, in the am familiar with, and accept the i	7.0502 and 607.1508, Florida Statut State of Florida. Such change was a obligations of, Section 607.0505, Flo	es, the above-named authorized by the cor orida Statutes.	d corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing if the appointment as	registered registered
	Signature, type dior printed name of register		Registered Agent signature		DATE	
12.	OFFICERS	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	IS IN 12 Addition
TITLE	LANTZ, STEVEN	L DELETE	1.1 TITLE			L Addition
NAME	PAN HOOHOTOHE WAY		1.2 NAME	101 BRINY AVE		
STREET ADDRESS	DELRARY BCH FL		1.3 STREET ADDRESS*	Portano Bah, PL	33062	
CHY-ST-ZIP TRUE	DEDITATION DOTTE	DELETE	2.1 TITLE		Change	Addition
NAME		band biccit	2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY - S1 - ZIP			2. 4 CITY-ST-ZIP	1		
TITLE		DELETE	3.1 TITLE	·	Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - \$1 - ZIF			3.4. CITY-ST-ZIP	L		
TOTE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STHEET ADORESS			4.3 STREET ADDRESS			
CHTV - S1 - ZiP			4.4 CITY- ST- ZIP	ļ		1 4 1 2 2 2
TITLF		☐ DELETE	5 1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CiTY-ST-ZiP		Change	Additio
TITLE		T DEFEIF	61 TITLE		CI Change	L AUGIDOI
NAME OZOGO LODOGO			62 NAME	i i		
STREET ADDRESS			63 STREET ADDRESS	·		
CITY-ST-2(P		F 1 20 1 S 177 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 4 CITY-ST-ZIP	140 07/049 51-51-5		46.4

In commercial control of 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 31 changed, or him attachment with an address.

SIGNATURE:

CHATHRE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTOR

STEVEN Lant

2/7/97

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