

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000226

FILED
Jul 07, 2008
Secretary of State

Entity Name: SS OPTICAL SUPPLY USA INC

Current Principal Place of Business:

HILTON GIFT SHOP
1870 GRIFFIN RD
DANIA, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

HILTON GIFT SHOP
1870 GRIFFIN RD
DANIA, FL 33004 US

New Mailing Address:

FEI Number: 74-2642270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHUGANI, SURESH
7672 NW 19TH ST.
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHUGANI, SURESH
Address: 1870 GRIFFIN ROAD
City-St-Zip: DANIA, FL 33004

Title: DV () Delete
Name: CHUGANI, DEVI
Address: 7672 NW 19TH ST
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SURESH CHUGANI

PRES

07/07/2008

Electronic Signature of Signing Officer or Director

_____ Date