

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Aug 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F97000002315 (6)

1. Corporation Name

CREATIVE OPTICS, INC.

Principal Place of Business
7332 EAST BUTHERUS DRIVE
SCOTTSDALE AZ 85260

Mailing Address
7332 EAST BUTHERUS DRIVE
SCOTTSDALE AZ 85260

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1997

4. FEI Number

86-0806230

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEOC
GUNION, JACK V
7332 EAST BUTHERUS DRIVE
SCOTTSDALE AZ 85260

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COOP
GRETHEL, FREDRIC J
7332 EAST BUTHERUS DRIVE
SCOTTSDALE AZ 85260

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFOS
SBLENDORIO, DOMINICK J
7332 EAST BUTHERUS DRIVE
SCOTTSDALE AZ 85260

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LENARD, MICHAEL B
10990 WILSHIRE BOULEVARD SUITE 1750
LOS ANGELES CA 90025

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROQUE, RICHARD S
2402A GREAT EAGLE CENTRE, 23 HARBOR ROAD
WANCHAI, HONG KONG

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ESTRADA, FRANCIS G
2402A GREAT EAGLE CENTRE, 23 HARBOR ROAD
WANCHAI, HONG KONG

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐

Change

Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐

Change

Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐

Change

Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐

Change

Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐

Change

Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐

Change

Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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.

SIGNATURE:

SIGNATURE

CEO 8/11/98 602-951-7174

CR2E034 (5/98)