2002 Uniform Business Report (UBR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF

SIGNATURE:

Apr 15, 2002 8:00 am Secretary of State DOCUMENT # F97000002315 1. Entity Name CREATIVE OPTICS, INC. 04-15-2002 90073 016 ***150 00 Principal Place of Business Mailing Address 7543 E TIERRA BUENA LN 7543 E TIERRA BUENA LN SCOTTSDALE AZ 85260 SCOTTSDALE AZ 85260 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 11-26/7368 86-0806230 Not Applicable Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **CEOP** ☐ Delete TITLE CR2E034 (9/01) CLO Addition NAME ASPER, PAUL D NAME STREET ADDRESS 1407 CORAL WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL SR.VP - CFO - S-T TITLE ☐ Delete **DCVP** TIT! F Change ■ Addition NAME CARSON, DICK NAME LARSON, DICK STREET ADDRESS 7543 E. TIERRA BUENA LANE STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP SCOTTSDALE AZ 85260 TITLE ☐ Delete Change ☐ Addition MC LEOD, GEORGE NAME NAME HELEOD, GEORGE STREET ADDRESS 7543 E. TIERRA BUENA LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SCOTTSDALE AZ 85260 TITLE ☐ Delete TITLE Addition Change LEWIS, POMY NAME LEWIS, POKY NAME STREET ADDRESS 1407 CORAL WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33145** VP - CONTROLLER TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME ABRAMS, JOSEPHINE STREET ADDRESS STREET ADDRESS 1543 E. TIERRA BUENA LANG CITY-ST-ZIP CITY-ST-ZIP SCOTTS PALE, AZ 85260 TITLE ☐ Delete TITLE ☐ Change Addition IVENZ, JOSEPH NAME NAME 7543 E. TIERRA BUENA CANE STREET ADDRESS STREET ADDRESS SCOTTS DALG. AZ 85260 CITY-ST-ZIP 13. 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 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 11 or Block 12 if