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



	COF ANNU	PROFIT RPORATION JAL REPORT		門影	ARTMENT B. Morth elary of State	OF S	STATE	Apr 28 1998 8:00am Secretary of State
Į.	OCUI Corporation	MENT #	J39862	(4)				
	MALON	IEY VEITCH A	ASSOCIATES, IN	IC.				I TRENTA BARRA CANTE PEREN CRIMA ROMA PAREN BARN BARN BARN BARN BARN BARN BARN AND AND AND AND AND AND AND AND AND AN
Pri	ncipal Place	e of Business		Mailing Address				
2090 WEAVER PARK DR CLEARWATER FL 34625			2090 WEAVER PARK DR CLEARWATER FL 34625					
	\$			US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
							<u> </u>	10/27/1986
2. 21	Principal Pi	lace of Business		2a. Mailing Address				4. FEI Number Applied For S9-2745927 Not Applicable
	Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22	City & State	A		City & State				Fee Hequired
23	Ony G Clar			28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Zip	├ ──	Country	Zip		untry		8. This corporation owes or has paid the curren year Intangible Personal Property Tax due June 30. Yes No
24		9. Name and	Address of Current	29 Registered Agent	30	····		Personal Property Tax due June 30. MYes No. 10. Name and Address of New Registered Agent
MALONEY, R THOMAS						81	Name	
2090 WEAVER PARK OR CLEARWATER FL 34625						82	Street Add	ddress (P.O. Box Number is Not Acceptable)
	OLI	ENNINNIEN I'L	34023			83		
						84	City	85 Zip Code
11	. Pursuani i	to the provisions of	1 Sections 607.0502	and 607,1508, Florida Stal	tutes, the a	bave	-named co	orporation submits this statement for the purpose of changing its registored
	office or re	enistered agent i	or both, in the State o	f Florida. Such change wa ons of, Section 607.0505,	s authoriza	d by	the corner	oration's board of directors. I hereby accept the appointment as registered
SI	GNATURE	Floretus troud a resi	ed name of registered agent	and talk if markers to	OT Provintes	d Ass	ol A grobus rog	squired when reinstaling) DATE
12		Signature, typecroir print	OFFICERS AND		13.	O Age	in s griatore rece	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITL	.E	VP.		DELETE	1.1 1	TLE		☐ Change ☐ Addition
NAN	ſ	VEITCH, JOH	IN A III DCEAN DR #607		1.2 N		ADDRESS	
_	EET ADDRESS (-St-Zip		ALE FL 33308			incei ITY-SI		
TITE		TŜ		DELETE	2.1 TI			☐ Change ☐ Addition
NAA	· ·	MALONEY, J			2.2 N			
ı	eet address 1-st-zip	2340 ROBER ORLANDO F				IREET. HY-S	ADDRESS	- w.
TITL		P	<u> </u>	DELETE	3.1 1		1-24	Change Addition
NAS	AE]	MALONEY, F			3.2 N			
1	EET ADDRESS	2365 WINDG CLEARWATE			1		ADDRESS	
TITL	r-st-zip E	V	n ru	DELETE	3.4. U	TLE	1-214	Change Addition
NA	Æ Ì	VEITCH, JAM			4.2 N	AME)	
	EET ADDRESS	712 HOLLY I			1		ADDRESS	
titl	(-ST-ZIP E	PLANTATION	FL 3331/	DELETE	4.4 C	(TY-S) TLE	r-ZIP	Change Addition
NAA	ì				5.2 N		1	
STR	EET ADDRESS				5.3 S1	raeet i	ADDRESS	
CIT	(-ST-ZIP			DELETE	5.4 CI 6.1 TI	11Y-S1	- ZIP	Change Addition
NAN	ì			- Dettile	6.2 N/			C. Criange C. Audulium
	eet address				6.3 S	TREET.	ADDRESS	
	1 hereby c	ertify that the info	rmation survived with	this fillion does not muslife		17 · \$1		in Section 119.07(3)(i). Florida Statutes. I further certify that the information

n nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplied with the informatio indicated on this annual report or supplied with the informatio indicated on the innual report is frue 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 our an attechnical with an address.

CNATURE:

FILED