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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K23969

(4)

SUTTON & CRUZ OPTICAL, INC.

FILED Jan 14 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 1860 MERDIAN AVE. 1660 MERDIAN AVE. MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-2822 US						Date Incorporated or Qualified	3a. Da	le of Last Re	eport
						05/16/1988	01/2	24/1996	
	lace of Business	2a. Mailing Address	2a. Mailing Address			4, FEI Number		Ap	plied For
	Same	26 50-	\			65-0052611			t Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	X	\$8.75 A	
City & Stat	θ	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zip	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29				Florida Statutes Yes No			
	g. Name and Address of Curre	nt Registered Agent		-		10. Name and Address of New Re	gistered A	igent	
	JZ, CARLOS M.		ľ	B1 N	ame	Same			
1660 MERDIAN AVENUE Miami Beach FL 33139				32 St	treet Addres	ddress (P.O. Box Number is Not Acceptable)			
			Ī	B3	·				
			-	84 C	ity		FL	85 Zip (Code
ad Downson	to the englished of Centings CO7 Dt.	02 and 507 1509 Florida Ctal	tutas the ob		mad saras	ration submits this statement for the p		obonaino it	o rociotorad
SIGNATURE	im familiar with, and accept the oblig Signature typed or profed name of registered ag	yout and the if applicable (N	OTE Registered		gnature required	d when reinstating)	DATE	DIDECTOR	- IN 10
12.	P OFFICERS AIN	ND DIRECTORS DELETE	13.	Е		ADDITIONS/CHANGES TO OFFIC	EHS AND	Change	Addition
NAME	ADUS ARIA		1	1.2 NAME				Onlingo	roginon
STREET ADDRESS	1660 MERIDAN AVENUE			1.3 STREET ADDRESS					
	MIAMI BEACH FL			1					
CITY-ST-ZIP TITLE	ST ST			1 4 CITY - ST - ZIP 2 1 TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAME	CRUZ, CARLOS		2.2 NA	l l					
STREET ADDRESS	1660 MERIDAN AVENUE	5 '		2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI BEACH FL			Y-ST-Z					
THILE		DELETE	3.1 TIT					Change	Addition
NAME			3.2 NA	ME				-	
STREET ADDRESS				EE1 ADD	RESS				
CiTY - ST - ZIP			3.4 CI	Y-ST-ZI	IP [_		
TITLE		DELETE	4.1 TIT	LE				Change	Addition
NAME			4 2 NA	ME					
STREET ADDRESS			4.3 STF	REET ADD	RESS				
CITY-ST-ZIP			4.4 CIT	Y - ST - ZII	Р				
TITLE		DELETE	5.1 TIT	LE.				Change	Addition
NAME			5 2 NA	ME					
STREET ADDRESS			5.3 ST	REET ADD	RESS				
CITY-ST-ZIP			5.4 CIT	Y-ST-ZI	P .				
TITLE		☐ DELETE	6.1 TiT	LE	İ			☐ Change	Addition
NAME			62 NA	ME	1				
STREET ADDRESS			12 6 3	REET ADD	RESS				
CITY-S1-ZIP			6 4 CIT	Y · ST - ZI	P				

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the plemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that he receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name f do hereby certify that the information indicated on the t am an officer or directo appears in Block 12 or 6

SIGNATURE:

0191266