2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000019775

1. Entity Name
SEVILLE OPTICAL COMPANY, LLC



FILED Mar 12, 2007 08:00 A Secretary of State

Principal Place of Business

10569 WALNUT VALLEY DR BOYNTON BEACH, FL 33437 Mailing Address

10569 WALNUT VALLEY DR BOYNTON BEACH, FL 33437



DO NOT WRITE IN THIS SPACE

02102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1245026	Applied For Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

MARTIN, DANIEL T 10569 WALNUT VALLEY DRIVE BOYNTON BEACH, FL 33437

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, DANIEL J 10569 WALNUT VALLEY DRIVE BOYNTON BEACH, FL 33437			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			03/21/07-80023-002 50.00	
TITLE NAME STREET ACOTESS CITY-ST-ZIP	·	DO N	OT-WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that president have the same legal effect as if made under cath; that I am a managing member or manager of the limited liability company or the receiver of trustee employee this report as required by Chapter 608, Florida Statutes.				

FRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REFRESENTATIVE

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. I am familiar with, and accept