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CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

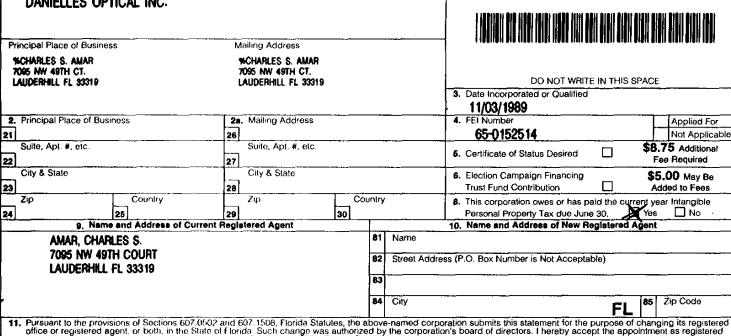
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

DANIELLES OPTICAL INC.

FILED Apr 14 1998 8:00am Secretary of State



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 t	tie if applicable (NOTE	Registered Agent signature requ	uired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE		☐ Change	Addition
NAME	AMAR, CHARLES S.		1.2 NAME			
STREET ADDRESS	7095 NW 49TH COURT		1.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERHILL FL		1.4 CITY-ST-ZIP			
TITLE	STO	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	AMAR, MONIQUE		2.2 NAME			
STREET ADDRESS	7095 NW 49TH COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	LAUDERHILL FL		2. 4 CITY-ST-ZIP			
TITLE	-	DELETE	3.1 TITLE		Change	Addition
NAME]			3.2 NAME	>		
STREET ADDRESS			3.3 STREET ADDRESS	•		
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4 1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME (6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
I			. ;			

14. I hereby 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 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 13 or Block 13 it changed, or on an altachny hit with an address.

SIGNATURE: