

08-21-96 12:15PM

TO 613058544849

P002

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**FILED****96 AUG 23 PM 2:31****SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

PROFIT CORPORATION ANNUAL REPORT 1994-1996	FLORIDA DEPARTMENT OF STATE Sandra B. Morthem Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M73340 Corporation Name F. SABATES Optical Services, Inc.
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Principal Place of Business 1199 W. Flagler St Miami, Fla 33130	Mailing Address SAME
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21. Principal Place of Business 1199 W. Flagler St Miami	26. Mailing Address SAME
22. City & State Miami	27. City & State Fla
23. Zip 33130	28. Zip 33130
24. Country USA	29. Country USA

3. Date Incorporated or Qualified 3/23/88	36. Date of Last Period 11/2/93
4. FEI Number 05-0062115	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

Name and Address of Current Registered Agent FELICIANO SABATES 2585 COLLINS AVE #1811 M. Bch, Fla 331	
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10. Name and Address of New Registered Agent	
81. Name MANTY SABATES	
82. Street Address (P.O. Box Number is Not Acceptable) 1246 S.W. 15th TERRACE	
83. City Miami	
84. City Miami	85. Zip Code FL 33145

I, pursuant to the provisions of Sections 007.0502 and 007.1502, 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 007.0505, Florida Statutes.

SIGNATURE: **Manty Sabates** 8/21/96

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE ☐ DELETE	1.1 TITLE PRESIDENT / VICE PRESIDENT	1.2 NAME FELICIANO SABATES	☐ Change ☒ Addition
2. NAME ☐ DELETE	2.1 NAME MANTY SABATES	2.2 STREET ADDRESS 1199 W. FLAGLER STREET	☐ Change ☒ Addition
3. STREET ADDRESS ☐ DELETE	3.1 STREET ADDRESS 1246 S.W. 15th TERRACE	3.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
4. CITY - ST - ZIP ☐ DELETE	4.1 CITY - ST - ZIP Miami, Florida 33145	4.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
5. CITY - ST - ZIP ☐ DELETE	5.1 CITY - ST - ZIP Miami, Florida 33145	5.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
6. CITY - ST - ZIP ☐ DELETE	6.1 CITY - ST - ZIP Miami, Florida 33145	6.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
7. CITY - ST - ZIP ☐ DELETE	7.1 CITY - ST - ZIP Miami, Florida 33145	7.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
8. CITY - ST - ZIP ☐ DELETE	8.1 CITY - ST - ZIP Miami, Florida 33145	8.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
9. CITY - ST - ZIP ☐ DELETE	9.1 CITY - ST - ZIP Miami, Florida 33145	9.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition
10. CITY - ST - ZIP ☐ DELETE	10.1 CITY - ST - ZIP Miami, Florida 33145	10.2 CITY - ST - ZIP Miami, Florida 33145	☐ Change ☒ Addition

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information submitted 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 687, Florida Statutes, and that my name appears in Block 14 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **FELICIANO SABATES** 8/22/96 - 305/324-1224

08/22/96 11:15

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