## **FILE NOW: FILING FEE IS \$61.25**

FILED NONPROFIT Jan 31 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 1-31-91 DIVISION OF CORPORATIONS N26893 DOCUMENT # GREATER SEVENTH AVENUE IMPROVEMENT ASSOCIATION. INC. Principal Place of Business Mailing Address % BUDGET OPTICAL % BUDGET OPTICAL 10992 NORTHWEST 7 AVE. 10992 NORTHWEST 7TH AVE MIAMI FL 33168-2108 MIAM! FL 33168 3. Date Incorporated or Qualified 3a. Date of Last Report US U\$ 06/10/1988 02/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0085243 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GITLAN** 82 Street Address (P.O. Box Number is Not Acceptable) % BUDGET OPTICAL 83 10992 NORTHWEST 7TH AVE **MIAMI FL 33168** 84 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) ☐ Addition DELETE Change 1.1 TITLE TITLE SCHAFMEISTER, VINCENT J 1.2 NAME NAME 1100 NORTHWEST 95TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE SD COBO, BLANCA NAME 2.2 NAME 13490 NW SEVENTH AVE. 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 2. 4 CITY-ST-ZIP DITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE 3.2 NAME DUTY, JOHN NAME 620 W 27ST 3.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 4.1 TITLE GITLIN, RON 4. 2 NAME NAME 10992 NW SEVENTH AVE STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP MIAMI FL 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE Change TITLE NAME HART, DOROTHY 5.2 NAME 9301 NORTHWEST 7 AVE 5.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Channe TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 suppliemental 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 of the receiver or truetge empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged or on an attainment with an address.