

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90089 037 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000000069

1. Corporation Name

OPEN EYES, INC.

Principal Place of Business

20731 NE 4TH PLACE, #104
MIAMI FL 33179

Mailing Address

20731 NE 4TH PLACE, #104
MIAMI FL 33179

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 5013 SW 130th Terrace		26 5013 SW 130th Terrace		01/07/1998	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 City & State		28 City & State		65-0878232	
Miramar, Florida		Miramar, Florida		Applied For	
24 Zip		29 Zip		Not Applicable	
33027		33027		5. Certificate of Status Desired	
25 U. S.		30 U. S.		☒ \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

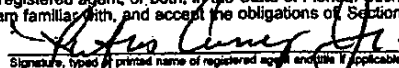
CURRY, RUFUS JR.
20731 NE 4TH PLACE, #104
MIAMI FL 33179

10. Name and Address of New Registered Agent

81 Name	RUFUS CURRY, JR.
82 Street Address (P.O. Box Number is Not Acceptable)	5013 SW 130th Terrace
83	
84 City	Miramar FL
85 Zip Code	33027

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 re-registering)

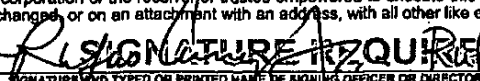
DATE

March 19, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CURRY, RUFUS JR.	1.2 NAME	
STREET ADDRESS	5013 SW 130 TER.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33027	1.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FRANKLIN, BENJAMIN II	2.2 NAME	
STREET ADDRESS	20731 NE 4TH PLACE, #104	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33179	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MCKINLEY, CONSUELO	3.2 NAME	
STREET ADDRESS	3110 ESTATES DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33069	3.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MORLEY, LEROY L SR.	4.2 NAME	
STREET ADDRESS	20731 NE 4TH PLACE, #104	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33179	4.4 CITY-ST-ZIP	
TITLE	P ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	WANTON, VELVATIA H	5.2 NAME	
STREET ADDRESS	1830 NW 186 ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33056	5.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	DORSEY, WANDA S	6.2 NAME	
STREET ADDRESS	15100 SW 105 AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	6.4 CITY-ST-ZIP	

14. I 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



Date

Daytime Phone #

March 19, 1999 (954) 344-2300

CR2E037 (11/98)