

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

07 APR -6 PM 2:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P06000047029

1. Entity Name  
OPTICOLORS, INC.



Principal Place of Business  
1200 N.E. 88TH STREET  
MIAMI, FL 33138

Mailing Address  
7098 BONITA DRIVE  
MIAMI BEACH, FL 33141

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

64052007

Chg-P

CR2E034 (12/06)

4. FEI Number  
51-0572240

Applied For  
Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PULLEY, CAMILO B  
1200 N.E. 88TH STREET  
MIAMI, FL 33138

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/05/07  
DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
P.T  
PULLEY, CAMILO B  
STREET ADDRESS  
1200 N.E. 88TH STREET  
CITY-ST-ZIP  
MIAMI, FL 33138

☐ Delete

TITLE  
NAME  
100096442861  
STREET ADDRESS  
04/11/07--01016--017 \*\*70.00  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
S  
PULLEY, CAMILO B  
STREET ADDRESS  
1200 N.E. 88TH STREET  
CITY-ST-ZIP  
MIAMI, FL 33138

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
VP  
SILVA, CARLOS F  
STREET ADDRESS  
1603 W HARMONY LAKE CIRCLE  
CITY-ST-ZIP  
DAVIE, FL 33324

☒ Delete

TITLE  
NAME  
VPD  
HAWKINS, MARILYN  
STREET ADDRESS  
1200 N.E. 88TH STREET  
CITY-ST-ZIP  
MIAMI, FL 33138

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/07

Daytime Phone #

(305) 708-2525