

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000016202

Entity Name: ZINNIA EYEWEAR, INC.

**FILED**  
**Aug 23, 2011**  
**Secretary of State**

**FILING CANCELLED**  
**RETURNED CHECK**

**Current Principal Place of Business:**

10220 REFLECTIONS BLVD. WEST #108  
SUNRISE, FL 33351

**New Principal Place of Business:**

11110 WEST OAKLAND PARK BLVD  
SUITE 175  
SUNRISE, FL 33351

**Current Mailing Address:**

10220 REFLECTIONS BLVD. WEST #108  
SUNRISE, FL 33351

**New Mailing Address:**

11110 WEST OAKLAND PARK BLVD  
SUITE 175  
SUNRISE, FL 33351

FEI Number: 27-2005310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEWAR, JENELLE  
10220 REFLECTIONS BLVD. WEST #108  
SUNRISE, FL 33351 US

**Name and Address of New Registered Agent:**

DEWAR, JENELLE  
11110 WEST OAKLAND PARK BLVD  
SUITE 175  
SUNRISE, FL 33351 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

08/23/2011

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DEWAR, JENELLE  
Address: 11110 WEST OAKLAND PARK BLVD SUITE 175  
City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JENELLE DEWAR

PRES

08/23/2011

Electronic Signature of Signing Officer or Director

Date