FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P17796** **(4)**

1. Corporation Name

RIO OPTICAL CORPORATION

Principal Place of Business	Mailing Address
2760 IRVING BLVD. DALLAS TX 75207	2760 IRVING BLVD. DALLAS TX 75207

2. Principal Place of Business	2a. Mailing Address
21 GLEN OAKS INDUSTRIAL PARK	26 GLEN OAKS INDUSTRIAL PARK
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 P.O. BOX 187	27 P.O. BOX 187
City & State	City & State
23 GLENDORA, NEW JERSEY	28 GLENDORA, NEW JERSEY
Zip / Country	Zip / Country
24 08029 / 25 US	29 08029 / 30 US

3. Date Incorporated or Qualified: **01/27/1988**
3a. Date of Last Report: **04/19/1995**

4. FEI Number: **75-1336810** ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.150(6), 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE

Signature, typed or printed name of Registered Agent and title if applicable — NOTE: Registered Agent is required to sign this report.

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	SCHWARTZ, WILLIAM A JR		12 NAME		
STREET ADDRESS	2760 IRVING BLVD.		13 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		14 CITY-ST-ZIP		
TITLE	TCS	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	MCHENRY, JR., GEORGE E		22 NAME		
STREET ADDRESS	2760 IRVING BLVD.		23 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		24 CITY-ST-ZIP		
TITLE	CEO	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	SCHWARTZ, WILLIAM JR		32 NAME		
STREET ADDRESS	2760 IRVING BLVD.		33 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		34 CITY-ST-ZIP		
TITLE	EVP	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	MCGRATH, JAMES M		42 NAME		
STREET ADDRESS	2760 IRVING BLVD.		43 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		44 CITY-ST-ZIP		
TITLE	EVP	☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME	SCHMIDT, GAYLE E		52 NAME		
STREET ADDRESS	2760 IRVING BLVD.		53 STREET ADDRESS		
CITY-ST-ZIP	DALLAS TX		54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. 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)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 3/29/96 (609) 228-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SECRETARY/TREASURER

CR2E034 (12/95)