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Mar 23, 1999 8:00 am Secretary of State

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P29556**

1. Corporation Name

SUNLAND OPTICAL COMPANY, INC.

| Principal Place of Business Mailing Address | | | | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | |
|---|--------------------------------|-------------|-------------------|--------------------|-----------------|----------------------|--|------------|----------------|-----------|
| 1156 BARRANCA 1156 BARRANCA | | | | | | | | | | |
| EL PASO TX 79935 EL PASO TX 79935 | | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | | 3. Date Incorporated or Qualifed | JI AGE | | ٦ |
| Į | | | | | | | 05/29/1990 | | | |
| | | To Us | iling Addrona | | | | 4, FEI Number | | Applied For | - |
| <u> </u> | ace of Business | <u> </u> | ailing Address | | | | 74-1667047 | \vdash | Not Applicable | ┨ |
| 21 | 4 -4- | 26 | ite, Apt. #, etc. | | | | 74"1007047 | | Additional | ╣ |
| Suite, Apt. | #, etc. | 27 | ite, Apt. #, etc. | | | | 5. Certificate of Status Desired | * - | Required | |
| City & State | | Cit | y & State | | | | 6. Election Campaign Financing | \$5.0 | O_May.Be | سالم |
| 23 | | 28 | | | | | Trust Fund Contribution | Adde | d to Fees | _ |
| Zip | Country Zip Co | | | | try | | 8. This corporation owes the current year Intangible | | | |
| 24 | 25 | 29 | 36 | 5] | | | Personal Property Tax. | ☐ Yes | □No | |
| | 9. Name and Address of Current | t Registere | ed Agent | | | | 10. Name and Address of New Registered A | gent | | 4 |
| | | | | 8 | 31 | Name | • | | | 1 |
| ABBOTT, ALAN | | | | | 32 | Street Addre | | | 7 | |
| BLDG. 950 | | | | | ~ | Oll Cot Additi | | | ╛ | |
| TYNI | DALL AFB FL 32403 | | | 8 | 83 | | | | | |
| | | | | 8 | B4 | City | | 85 Zi | p Code | ┨ |
| | | | | | - | • | <u>FL</u> | | | _[|
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. | | | | | | | | | | |
| SIGNATURE | | | | | | | | | | - [|
| | | | | | gent | t signature required | | DIDEC. | TODS (N. 12 | -13 |
| 12. | | D DIRECTO | DELETE | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND | Change | | \exists |
| TITLE | PD ADDOTT ALAN | | □ DECETE | | | | | | | |
| NAME | ABBOTT, ALAN | | | 1.2 NAM | - | | | | | |
| STREET ADDRESS | | | | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | EL PASO TX | | | | 1.4 CITY-ST-ZIP | | | Change | e Addition | ; ├. |
| TITLE | VD | | | | 2.1 TITLE | | | charigi | e UMUUUU | ` ` |
| NAME | ALSTON, JAMES | | | 2.2 NAM | Œ | | | | | - |
| STREET ADDRESS | 9942 BELFAST | | | 2.3 STR | EET. | ADDRESS | | | | 1 |
| CITY-ST-Z!P | EL PASO TX | | | 2.4 CITY-ST-ZIP | | | | | | 4 |
| TITLE | | | 3.1 TITLE | 3.1 TITLE | | | Change | e Addition | <u>'</u> | |
| ABBOTT, EUZABETH | | | 3.2 NAME | | ~= | | ~ ** ** ** = | - | 7 | |
| STREET ADDRESS | 10912 DON JANUARY | | | 3.3 STRI | EET | ADDRESS | · | | | |
| CITY-ST-ZIP | EL PASO TX | | | 3.4. CITY | Y-\$1 | T-ZIP | | | | _ |
| TITLE | VD | | ☐ DELETE | 4.1 TITL | E | T | | ☐ Chang | e Addition | 1 |
| NAME | ABBOTT, S L | | | 4. 2 NAN | ИE | | | | | |

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

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

1156 BARRANCA

ABBOTT, ARLINE

1156 BARRANCA

EL PASO TX

EL PASO TX

☐ DELETE

☐ DELETE

Daytime Phone #

☐ Change

☐ Addition

☐ Addition