

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:00

DOCUMENT # P92000007876 (5)

1. Corporation Name
SOBE OPTIK, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
153 SEVILLA AVE. CORAL GABLES FL 33134		P.O. BOX 140668 CORAL GABLES FL 33134	

3. Date Incorporated or Qualified 11/25/1992	3a. Date of Last Report 02/15/1994
4. FEI Number 65-0377696	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

MJF REGISTERED AGENT CORP.
153 SEVILLA AVE.
CORAL GABLES FL 33134

10. Name and Address of Now Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	BEINER, EDWARD
STREET ADDRESS	153 SEVILLA AVE.
CITY-ST-ZIP	CORAL GABLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(3)(k), 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 its receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with my address.

SIGNATURE: _____ DATE: **2-6-95** **661-1205**
SIGNATURE AND TYPED OR PRINTED NAME OF DRIVING OFFICER OR DIVISION FILE REGISTRATION DIVISION
(305)

Law Offices
MICHAEL J. FREEMAN, P.A.
153 Sevilla Avenue
Coral Gables, Florida 33134-6088

Reply to:
P.O. Box 140668
Coral Gables, Florida 33114-0668

Tel: (305) 442-1567
Fax: (305) 442-1227

February 14, 1995

Secretary of State
Division of Corporations
Annual Report Section
P.O. Box #1500
Tallahassee, Florida 32302-1500

Re: **SOBE OPTIK, INC.**
Document #P92000007876 (5)

Gentlemen:

Enclosed please find the following documents for this corporation:

1. Executed 1995 Annual Corporate Report;
2. My client's check #1679 in the amount of \$200.00 representing the filing fee.

Thank you for your courtesies in this matter.

Very truly yours,


MICHAEL J. FREEMAN

MJF:lc
enc.
cc:client
2774-4A8