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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000040654 (4)

SUNGLASS HUT OF MEXICO, INC.

2. Principal Place of Business Suffe, Apt. #, etc.		12TH FLOOR CORAL GABLES FL 33134-7403 US 2a. Mailing Address 26			Date Incorporated or Qualified 06/07/1993	3a. Date of Last Report 05/01/1996	
					4. FEI Number 65-0450097	Applied For Not Applicat	
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
City & Stat	te	City & State			6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	28	Count	ry	Trust Fund Contribution 8. This corporation has liability for i	Added to Fees ntangible tax under s. 199.032,	
4	25	29	30			Yes No	
	9. Name and Address of Curre	ent Registered Agent		1 Name	10. Name and Address of New Re	gistered Agent	
	CORPORATION SYSTEM		°	1 Name			
	NO SOUTH PINE ISLAND ROAD NOTATION FL 33328		82 Street A		Address (P.O. Box Number is Not Acceptable)		
			8	3			
			8	4 City		FL 85 Zip Code	
11. Pursuant office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the obl	502 and 607.1508, Florida Stati te of Florida Such change was igations of, Section 607.0505, F	utes, the abo authorized lorida Statut	ve-named oby the corp	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of changing its register of the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered a	appliand tills of applicable. (Alf	Off: Branchard I	and simplification	required when reinstating)	DATE	
12.		ND DIRECTORS	13.	grant biginalary	ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·	
TITLE	POOD	DELETE	1.1 1)11.1		P/CEO/D	Change 🔲 Addit	
NAME	CHADSEY, JACK B		1.2 NAM	[•		
	ORE ALMANIRDA PID						
STREET ADDRESS	255 ALHAMBRA CIR.		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY	-S1-ZIF			
CITY-ST-ZIP TITLE	CORAL GABLES FL	☐ DELFTE	1.4 C/TY 2.1 T/TL/	-S1-ZIF	V/CFO/T/D	Change 🔲 Addit	
CITY-ST-ZIP TITLE NAME	CORAL GABLES FL VOFO PETERSON, LARRY	DELFIL	1.4 CITY 2.1 TITU 2.2 NAM	-ST-ZIP :	V/CFO/T/D Petersen,Larry	Change Addit	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	CORAL GABLES FL VCFO PETERSON, LARRY 255 ALHAMBRA CIRCLE	☐ DELFTE	1.4 C/TY 2.1 T/T/L 2.2 NAM 2.3 STRE	-ST-ZIP E E1 ADDRESS	V/CFO/T/D Petersen, Larry	Change Addit	
City-St-Zip Title NAME Street Address City-St-Zip	CORAL GABLES FL VCFO PETERSON, LARRY 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134		1.4 CITY 2.1 TITLU 2.2 NAM 2.3 STRE 2.4 CITY	-ST-ZIP E E1 ADDRESS -S1-ZIP	V/CFO/T/D Petersen, Larry		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CORAL GABLES FL VCFO PETERSON, LARRY 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134 SATD	☐ DELETE	1.4 CITY 2.1 TITLI 2.2 NAM 2.3 STRE 2. 4 CITY 3.1 TITLI	- S1 - ZIP E E1 ADDRESS - S1 - ZIP	V/CFO/T/D Petersen, Larry	Change Addit	
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