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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **PA0000063273**

1. Corporation Name

**Eyecatcher of America, Inc.**

Principal Place of Business

Mailing Address

**1314 Cape Coral Pkwy.  
Cape Coral, FL 33904**

**P.O. Box 68  
Cape Coral, FL 33910**

2. Principal Place of Business

**21 1314 Cape Coral Pkwy.**

2a. Mailing Address

**26 P.O. Box 68**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 204**

**27**

City & State

City & State

**23 Cape Coral, Florida**

**28 Cape Coral, FL**

Zip

Country

Zip

Country

**24 33904**

**25 USA**

**29 33910**

**30 USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Walter J. Reulhof  
5265 Nautilus Drive  
Cape Coral, FL 33904**

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 607.1508, 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

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**Heinrich Lufes P.S. [ ] DELETE**

**5313 Hatalulea Ct.**

**Cape Coral, FL 33904**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**Walter J. Reulhof [ ] DELETE**

**5265 Nautilus Drive**

**Cape Coral, FL 33904**

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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SIGNATURE:

**Walter J. Reulhof**

**4/30/97**

**941 540-0278**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)