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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P9400000018 (9)

FILED Apr 22 1998 8:00am Secretary of State

	BLVD, OPTICAL, INC					
Principal Place of Business Mailing Address						
3252 DAVIE BLVD. 3252 DAVIE BLVD. FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312						
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Addre			12/22/1993 4. FEI Number	T LA TRACE
	iaca or pusitioss	 	26 26		65-0463849	Applied For
Sulte, Apt.	#, etc		Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	Not Applicable \$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country Zip Country			8. This corporation owes or has paid the c		
24	25	29	30		Personal Property Tax due June 30.	Yes No
- FD		of Current Registered Agent	81	Name	10. Name and Address of New Registerer	Agent
FRANKEL, JEFFREY M				TYCHTC		
	3 North Shore Drive Erfield Beach Fl 334		82	Street Addre	ss (P.O. Box Number is Not Acceptable)	
	ENPIELD DENOTIFE 334	74	63			
			84	City	F	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 eigent, or both in 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 anotac cept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, and organizations of registered agent and local physicals. (NOTE Registered Agent signature required when reinstating) DATE						
12.		CERS AND DIRECTORS	13.	ognature required	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PD	☐ DEL				Change Addition
NAME	Frankel , Jeffrey I		1.2 NAME			
STREET ADDRESS 678 NORTH SHORE DRIVE			1.3 STREET A	DORESS		
CITY-ST-ZIP	DE ERFIELD BEACH F		1.4 CITY-ST-	ZIP		
TITLE		☐ DELETE				Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET A	DORESS		
CITY-ST-ZIP			2. 4 CITY - ST	- ZIP		
TITLE	DELETE					Change Addition
NAME OTDEET ADDOCCO	orce		3.2 NAME	3.3 STREET ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP TITLE	DELETE		3.4. CITY - ST ETE 4.1 TITLE	- ZIP		Change Addition
NAME	_ onen		4. 2 NAME			C ougrido C vontroit
STREET ADDRESS			4.3 STREET A	DDBEGG :		
CITY-ST-ZIP			4.4 CITY- ST-			
TITLE	DELETE			E.:		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET A	DDRESS		
CITY-ST-ZIP			54 CITY-ST-			
TITLE	DELETE					☐ Change ☐ Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET A	DDRESS		
CITY-ST-ZIP			6.4 CITY - ST -			
44 horoby o	actifus that the information of	applied with this filing done not a	until for the assessment	an alalad in C	Action 110 07/21/i) Florido Statutas, Lifurthas e	and the short the sindependent

Indicated on this annual report or supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic 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 in an attachment with an address.