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FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000016153 (6)

1. Corporation Name

SUNGLASS HUT HOLDINGS OF FRANCE, INC.



Principal Place of Business

Mailing Address

255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134
US

255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1994

4. FEI Number

65-0482292

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ 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 Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDC ☒ DELETE

NAME CHADSEY, JACK B
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL

TITLE VTDC ☐ DELETE

NAME PETERSEN, LARRY
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL

TITLE SDAT ☐ DELETE

NAME PITA, GEORGE L
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE AS ☒ DELETE

NAME MARBAN, MARLENE
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE VD ☐ DELETE

NAME GRUND, EDWARD L
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PDC ☒ Change ☐ Addition

1.2 NAME JOHN X. WATSON
1.3 STREET ADDRESS 255 ALHAMBRA CIRCLE
1.4 CITY-ST-ZIP CORAL GABLES, FL 33134

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE AS ☒ Change ☐ Addition

4.2 NAME MICHAEL T. CORNELIUS
4.3 STREET ADDRESS 255 ALHAMBRA CIRCLE
4.4 CITY-ST-ZIP CORAL GABLES, FL 33134

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, or on an amendment to an address.

SIGNATURE

CR2E034 (10/97)