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1995



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **P94000024293 (0)**

95 MAY - 1 PM 12:45

SUNGLASS HUT OF SOUTHERN FRANCE, INC.

255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134

255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134

3. Date of filing: **03/29/1994**
3a. Date of next filing: ☒ Annual ☐ Other

2. Filing of this report is required by:	2a. Filing of this report is required by:	4. Filing of this report is required by:	☒ Annual ☐ Other
21. Filing of this report is required by:	26. Filing of this report is required by:	5. Certificate of State Income Tax	☐ \$8.75 Additional Fee Required
22. Filing of this report is required by:	27. Filing of this report is required by:	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
23. Filing of this report is required by:	28. Filing of this report is required by:	8. This corporation has liability for interjurisdictional tax under 215C(1)(b) Florida Statutes	☒ Yes ☐ No
24. Filing of this report is required by:	29. Filing of this report is required by:	30. Filing of this report is required by:	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

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

11. Pursuant to the provisions of Sections 215C(1)(b) and 215C(2)(b) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office as reported on its report in the State of Florida. This change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in accordance with and subject to the provisions of Sections 215C(1)(b) and 215C(2)(b) Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent)

(Signature of New Registered Agent)

(Signature)

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
NAME: D CHADSEY, JACK B ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: PIOTR D ADDRESS: 4455 SW 10th St 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D HAUSLEIN, JAMES N ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: HAUSLEIN, JAMES N ADDRESS: 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D PITA, GEORGE L ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: PITA, GEORGE L ADDRESS: 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D PETERSEN, LARRY ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: PETERSEN, LARRY ADDRESS: 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134
NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES FL 33134	NAME: D ADDRESS: % 255 ALHAMBRA CIRCLE CORAL GABLES, FL 33134

14. I, the undersigned, certify that the information reported with this filing is accurate, true and correct, and I agree to keep the corporation informed of any changes to the information reported. I further certify that the information reported on this filing is accurate, true and correct, and I agree to keep the corporation informed of any changes to the information reported. I further certify that the information reported on this filing is accurate, true and correct, and I agree to keep the corporation informed of any changes to the information reported.

SIGNATURE: *Margene M. Harban*
MARGENE M. HARBAN
ASST. SECRETARY

5/4/95 305-462-6101