

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 A
Secretary of State

DOCUMENT # P94000040762

1. Entity Name
OPTICAL BOUTIQUE OF MARCO, INC.



Principal Place of Business
**599 SOUTH COLLIER BLVD., #309
MARCO ISLAND, FL 34145**

Mailing Address
**599 SOUTH COLLIER BLVD., #309
309
MARCO ISLAND, FL 34145**



01312007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0506848

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREUSEL, JAMIE B
1104 N. COLLIER BLVD.
MARCO ISLAND, FL 33937**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MARKOWSKI, GRETA
STREET ADDRESS 599 SOUTH COLLIER BLVD., #309
CITY-ST-ZIP MARCO ISLAND, FL 33937

TITLE TDS
NAME FICARRA, JOHN
STREET ADDRESS 599 SOUTH COLLIER BLVD., #309
CITY-ST-ZIP MARCO ISLAND, FL 33937

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U00000631123
02/20/07-80034-019 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Greta Markowski* **GRETA MARKOWSKI** *X 2/8/07 239-642 4776*
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #