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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name P94000049652 (8)

GUERRA OPTICAL, INC.

Dringing	Dlago of	Rueinace

Mailing Address



14344 S.W. 9 MIAMI FL 33	OTTH TERRACE 186	14344 S.W. 97TH TERR/ MIAMI FL 33186	ACE	3. Date Incorporated or Qualified	3a. Date of Last Report
				07/05/1994 4. FEI Number	01/18/1995
2. Principal Pla	ce of Business IE 4 AVE.	2a. Mailing Address 26 3781 F.	4 AVE	65-0502886	Applied For Not Applicable
Suite, Apt. #		Suite, Ant. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
City & State	1544 FL	City & State 28 HIALE A	MFL	Election Campaign Financing Trust Fund Contribution	5.00 May Be Added to Fees
Zip 330	0/3 Country S/4	Zip 33013	Country 30 US A	8. This corporation has lability or in Florida Statutes ✓ Yes	ntangible tax under s 199.032,
	9. Name and Address of Curren	it Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	A, MARLENE B.W. 97TH TERRACE		82 Street Add	lress (P.O. Box Number is Not Acceptab	le)
	L 33186		83		
			84 City		FL 85 Zip Code
or registere familiar with	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric h, and accept the obligations of, Sect	da. Such change was authorized	i, the above named corpo d by the corporation's boa	ration submits this statement for the pur and of directors. I hereby accept the appo	pose of changing its registered offici pintment as registered agent. I am
Signature _	Signature, typed or printed name of registered agent	and the if annituable (NOTE	Registered Agent signature require	es when reinstating	DATE
12.	OFFICERS AN	D DIRECTORS /	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1 TITLE		Change Addition
NAME	GUERRA, MARLENE		1.2 NAME		
STREET ADDRESS	14344 S.W. 97TH TERRACE		1.3 STREET ADDRESS		
City-St-Zip	MIAMI FL 33186		1.4 CvTY - ST - ZiP		
TITLE	D	☐ DETEIE	2 1 HILE P/S		Change Addition
NAME	Guerra, adela		2.2 NAME		
STREET ADDRESS	551 EAST 60TH ST.		2.3 STREET ADDRESS		
CITY - ST - ZIP	HIALEAH FL 33013				
	HINETALL L COOLIS		2.4 CIEY - \$1 - 7iP		
TITLE	HINLENI (L 00010	DELETE	2.4 CIEY - \$1 - 7/2 3. 1 Trite		Change Addition
	TIMENI (E SSVIS	DELETE	3 1 DILE 3 2 NAME		Change Addition
NAME	HINLEN(I (L 35013	☐ DELETE	3 1 HILE 3 2 NAME 3 3 STHEET ACCRESS		☐ Change ☐ Addition
NAME STREET ADDRESS CITY - ST - ZIP	HINLEN(I (L 35013	_	3 1 TITLE 3 2 NAME 3 3 STAGE* ACORESS 3 4 CITY - ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP	HINLEN(I (L 35VI)	☐ DELETE	3 1 TITLE 3 2 NAMF 3 3 STAGE* ACORESS 3 4 CITY - ST-ZIP 4 1 TITLE		Change Addition
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NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	THALLACT (L. 35013	DELETE	3 1 HILE 3 2 NAMF 3 3 STAGE* ADDRESS 3 4 CITY-SI-ZIP 4 1 HILE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-SI-ZIP 5 1 THE 5 2 NAME 5 3 STREET ADDRESS		Cnange Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	THALFALL (L. 35VIS	☐ DELEJE	3 1 HILE 32 NAME 33 STAGE* ADDRESS 34 CITY-ST-ZIP 4 1 HILE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 HILE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP		Change Addition
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ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

691-2020