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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 04 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000049652 (8)

GUERRA OPTICAL, INC.

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Principal Place of Business Mailing Address 3781 E 4 AVE HIALEAH FL 33013 HIALEAH FL 33013 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/05/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 21 65-0502886 Not Applicable Suite, Apt. #, etc. Suite, Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 Clfy & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GUERRA. MARLENE 14344 S.W. 97TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33186** 83 Zip Code 85 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 title if applicable. (NOTF: Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE PS **GUERRA, ADELA** NAME 1.2 NAME 551 EAST 60TH ST. STREET ADDRESS 13 STREET ADDRESS HIALEAH FL CITY-ST-ZIP 1.4 C(TY-ST-7)P DELETE TITLE 21 TITLE Change ☐ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE Change ___ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 it 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 attachment with an address.