

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000073638

1. Entity Name

EURO OPTICS INCORPORATED

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90044 010 ***150.00

Principal Place of Business

7220 NW 36TH STREET
SUITE 307
MIAMI FL 33166
US

Mailing Address

7220 NW 36TH STREET
SUITE 307
MIAMI FL 33172-2165
US

2. Principal Place of Business

2335 N.W. 107TH Ave.

Suite, Apt. #, etc.

Suite 2M57

City & State

Miami, FL

Zip
33172

Country

USA

3. Mailing Address

2335 N.W. 107TH Ave.

Suite, Apt. #, etc.

Suite 2M57, Box 106

City & State

Miami, FL

Zip

33172

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0529982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RANKIN, JANE C
ONE EAST BROWARD BLVD
SUITE 1600
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME LAL, ANIL
STREET ADDRESS 7220 NW 36TH ST., STE 307
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE VT
NAME LAL, MARIBEL
STREET ADDRESS 7220 NW 36TH STREET, SUITE 307
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME Lal, Anil
STREET ADDRESS 2335 NW 107TH Ave., Suite 2M57
CITY-ST-ZIP Miami, FL 33172 ☒ Change ☐ Addition

TITLE VT
NAME Lal, Maribel
STREET ADDRESS 2335 NW 107TH Ave., Suite 2M57
CITY-ST-ZIP Miami, FL 33172 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/2000

Date

305-711-7810

Daytime Phone #

CR2E034 (9/99)