FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000084910 (6)

EYESWEET, INC.

FILED Apr 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					## B1610 (B10# 110# B0## 100#	
1075 75TH STREET OCEAN 1075 75TH STREET OCEAN			4			
MARATHON FL 33050 MARATHON FL			N .			
İ					DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified 11/21/1994	
<u> </u>	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			65- 05 53180	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc. 27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	City & State		6, Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	•	8. This corporation owes or has paid the cu	
24	25		10			Yes No
STITES, WILLIAM				10. Name and Address of New Registered Agent 81 Name		
		61	Name			
	ASCAPE		82	Street Add	ress (P.O. Box Number is Not Acceptable)	·
	75 75 TH ST		-			
M.A	RATHION FL 33050		83			
			84	City	FL	85 Zip Code
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, typod or pointed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstalling). DATE						
	Signature, lyped or ponted name of registe	red agent and the if applicable (NOTE IS AND DIRECTORS		nt signature requi		DIDEOTODO (1) 44
12.	VPS	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	STITES, SARA		1.2 NAME			
STREET ADDRESS	1075 75TH ST		1.3 STREET	YDDDECC		
CITY-\$T-ZIP	MADATHON EI		1.4 CITY - S			
TITLE			2.1 TITLE	1-211		☐ Change ☐ Addition
NAME	STITES, SARAH		2.2 NAME			
STREET ADDRESS	1075 75TH ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	MARATHON FL		2. 4 CITY - S	1		
TITLE			3.1 TITLE	11-211		Change Addition
NAME		<u>—</u>	3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY-S			
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4 2 NAME			"
STREET ADDRESS			4 3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 City-St			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - SI]
TITLE	:	DELETE	6.1 TITLE			Change Addition
NAME	ı		6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP	• .		6.4 CITY-S1	1		İ

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 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 12 or Block 13 if changed, or on an attachment with an oddress.