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PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P94000091236 (7) DOCUMENT # Corporation Name EYEGLASS BOUTIQUE, INC. Mailing Address Principal Place of Business 1225 S. ORANGE AVENUE 1225 S. ORANGE AVENUE ORLANDO FL 32806 ORLANDO FL 32806 3a. Date of Last Report 3. Date Incorporated or Qualified 04/17/1995 12/15/1994 Applied For 4. FEI Number 2a. Maling Address 2. Principal Place of Business 59-3286743 Not Applicable 26 21 \$8.75 Additional Suite. Apt. #, etc Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 \$5,00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199.032, Country Country Zin $Z_{\rm IP}$ Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) SLAYTON, DENNIS W 82 2314 DAWNWOOD LANE 83 ORLANDO FL 32809 Zip Code 84 Crty 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the objections of, Section 607.0505, Florida Statutes. Dennis Slayton SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Change - Addition DELETE .. 1.17d1E TITLE 12 NAME SLAYTON, DENNIS W NAME 2314 DAWNWOOD LANE 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32809 1.4 CITY - ST - ZIP CITY-ST-ZP Change [Addition DELETE 2 1 10 LE THILE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 C-T1 - S1 - ZiF City - St - Zip Addition DELFTE 3 1 1010 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 C-TY - ST - Z-P CITY-ST-7/P Change Addition DELETE 4 1 HILF TITLE 4.2 NAME NAME 4.3.5186ELLADORESS STREET ADDRESS 4.4 CITY - ST - Z P CHTY - ST-ZIP Change Addition DELETE 5 1 Tillet TITLE 5.2 NAME NAMÉ 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - Zin CITY - ST - ZIP Addit an ☐ Change DELETE 6 1 HT.E TITLE 6.2 NAME

14. If do hereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath, 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 cath, 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

6.3 STREET ADDRESS

6.4 CITY - S* - 7/P

SIGNATURE:

NAME

STREET ADDRESS

Dennis Slayton

1/25/96 (401) 847 0130

CR2E034 (12/95)