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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000054012 (5)

FLA. EYE EQUIPMENT, INC.

Principal Place of Business Mailing Address 102 POLK ST. 102 POLK ST. AUBERNDALE FL 33823 AUBERNDALE FL 33823 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/24/1996 2a. Mailing Address 4. FEI Number Applied For 59-3385868 26 Not Applicable Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 MYERS, JEROD 102 POLK ST. 82 Street Address (F **AUBERNDALE FL 33823** 83 Pursuant to the provisions of Sections 607,0002 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 (NOTE: Rog sterod Agent signature required when reinstating) Signature, typed or printed rishin of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition MYERS, JEROD L NAME 1.2 NAME 14515 POTANOW TRAIL STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY - \$1 - 2IP DELETE Change Addition TITLE 2.1 TITLE KELL, MISTY NAME 2.2 NAME 615 AVENUE Q SE STREET ADDRESS 2.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3 3 STREET ALIDRESS CITY - ST - ZIP 3.4. CHY-ST-ZIP DEL ETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - 7IP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - 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 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 address.

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 City - ST - ZIP

DELETE

EIGNATURE: VENTAL

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Jan 28 98

Change

Addition

FILED

Feb 06 1998 8:00am

Secretary of State

CR2E034 (10/97)