

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Oct 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000005887 (9)

1. Corporation Name

ENYE, INC.

Principal Place of Business

9225 COLLINS AVE. PH-G
SURFSIDE FL 33154

Mailing Address

9225 COLLINS AVE. PH-G
SURFSIDE FL 33154



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1997

4. FEI Number

65-0738112

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 117 Majorca Av.

Suite, Apt. #, etc.

22 1st. Floor West

City & State

23 Coral Gables, Fl.

Zip

24 33134

Country

25 Dade

2a. Mailing Address

26 117 Majorca Av.

Suite, Apt. #, etc.

27 1st. Floor West

City & State

28 Coral Gables Fl.

Zip

29 33134

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

GONZALEZ, DENNY
9225 COLLINS AVE, PH-G
SURFSIDE FL 33154

81 Name

Denny Gonzalez

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

3674 NW 2 St.

83

84 City

Miami

FL

85 Zip Code

33125

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

Denny Gonzalez

(NOTE: Registered Agent signature required when reinstating)

9/15/98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GONZALEZ, DENNY
STREET ADDRESS 9225 COLLINS AVE, PH-G
CITY-STATE-ZIP SURFSIDE FL 33154

TITLE D ☐ DELETE

NAME CALDERIN, CHARLIE
STREET ADDRESS 3107 ALHAMBRA CIRCLE
CITY-STATE-ZIP CORAL GABLES FL 33134

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Denny Gonzalez ☒ Change ☐ Addition

1.2 NAME 3674 NW 2 St.

1.3 STREET ADDRESS Miami Fl. 33125

1.4 CITY-STATE-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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.

SIGNATURE:

[Signature]

9/15/98 (205) 642-8539

CR2E034 (5/98)