07-08-1999 90022 026 ... 150.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JUL -9 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000033786

1. Corporation Name
CANTOR'S OPTICAL SOLUTION, INC.

Principal Place of Business	Mailing Address
9101 LAKE RIDGE BLVD. BAY #6 BOCA RATON FL 33498	9101 LAKE RIDGE BLVD. BAY 6 BOCA RATON FL 33498

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/15/1997

2. Principal Place of Business	2a. Mailing Address
	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	27
City & State	City & State
	28
Zip / Country	Zip / Country
25	29 / 30

4. FEI Number: 65-0747743 ☐ 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

7. This corporation owes the current year Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CANTOR, DAVID
9101 LAKE RIDGE BLVD.
BAY #6
BOCA RATON FL 33498

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
ME	CANTOR, DAVID	1.2 NAME	
REET ADDRESS	9101 LAKE RIDGE BLVD., BAY 6	1.3 STREET ADDRESS	
Y-ST-ZIP	BOCA RATON FL 33498	1.4 CITY-ST-ZIP	
TLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
ME	CANTOR, JUNE	2.2 NAME	
REET ADDRESS	9101 LAKE RIDGE BLVD., BAY 6	2.3 STREET ADDRESS	
Y-ST-ZIP	BOCA RATON FL 33498	2.4 CITY-ST-ZIP	
TLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
ME		3.2 NAME	
REET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
TLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
ME		4.2 NAME	
REET ADDRESS		4.3 STREET ADDRESS	
Y-ST-ZIP		4.4 CITY-ST-ZIP	
TLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
ME		5.2 NAME	
REET ADDRESS		5.3 STREET ADDRESS	
Y-ST-ZIP		5.4 CITY-ST-ZIP	
TLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
ME		6.2 NAME	
REET ADDRESS		6.3 STREET ADDRESS	
Y-ST-ZIP		6.4 CITY-ST-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: DAVID CANTOR 7/1/99 561-478-4443
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (5/99)