

3/30

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

03-30-2001 90334 048 ***150.00

DOCUMENT # P97000067624

1. Entity Name

EYES, ETC., INC.

Principal Place of Business

820 W. LAKE MARY BLVD., STE. 104
SANFORD FL 32773

Mailing Address

820 W. LAKE MARY BLVD., STE. 104
SANFORD FL 32773

2. Principal Place of Business

100 INTERNATIONAL PKWY 100 INTERNATIONAL PKWY

Suite, Apt. #, etc.

SUITE 118

City & State

LAKE MARY FL

Zip

32746

Country

3. Mailing Address

100 INTERNATIONAL PKWY

Suite, Apt. #, etc.

SUITE 118

City & State

LAKE MARY FL

Zip

32746

Country

4. FEI Number 59-3458621

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

PETERSON, INGRID
820 W. LAKE MARY BLVD., STE. 104
SANFORD FL 32773

7. Name and Address of New Registered Agent

Name

SANDRA J. CARLI

Street

100 INTERNATIONAL PKWY STE 118

City

LAKE MARY

FL 32746

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	PETERSON, INGRID	
STREET ADDRESS	820 W. LAKE MARY BLVD., STE. 104	
CITY-ST-ZIP	SANFORD FL 32773	
TITLE	D	☒ Delete
NAME	LOGAN, CAROL	
STREET ADDRESS	820 W. LAKE MARY BLVD., STE. 104	
CITY-ST-ZIP	SANFORD FL 32773	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT	☐ Change ☒ Addition
NAME	SANDRA J. CARLI	
STREET ADDRESS	100 INTERNATIONAL PKWY STE 118	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sandra J. Carli

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/01

Date

407-805-0905

Daytime Phone #

CR2E034 (10/00)