

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
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DOCUMENT #
1. Corporation Name

P97000076755
EYE COM, INC.

FILED

98 JUN -5 AM 9:11

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5871 SW 14 ST
MIAMI FL 33144

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Sept 2, 1997

2. Principal Place of Business

2a. Mailing Address

21 5871 SW 14 ST

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI

28

24 Zip

25 Country

29 Zip

30 Country

33144

US

29

30

4. FEI Number

65-0784261

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PHILIP M. FRIEDER
5871 SW 14 ST
MIAMI FL 33144

81 Name

SAME

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

83

800002553868--9

84 City

06/09/98 01124 026

****150R10 ****150.00

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

PHILIP M. FRIEDER

Philip M Frieder

4-15-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT, CHAIRMAN	☐ DELETE
NAME	PHILIP M. FRIEDER	
STREET ADDRESS	5871 SW 14 ST	
CITY-STATE-ZIP	MIAMI FL 33144	
TITLE	SECRETARY, TREASURER	☐ DELETE
NAME	MARTHA L. BALAFAS FRIEDER	
STREET ADDRESS	5871 SW 14 ST	
CITY-STATE-ZIP	MIAMI FL 33144	
TITLE	DIRECTOR	☐ DELETE
NAME	WILLIAM THEODORIDES	
STREET ADDRESS	5871 SW 14 ST	
CITY-STATE-ZIP	MIAMI FL 33144	
TITLE	DIRECTOR - INCORPORATOR	☒ DELETE
NAME	Felix TORRES	
STREET ADDRESS	7315 SW 34 ST, RD	
CITY-STATE-ZIP	MIAMI FL 33155	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
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 of this report, or on an attachment with an address.

SIGNATURE: PHILIP M FRIEDER Philip M Frieder April 15, 1998 (305) 261-1410

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)