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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700090010

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90068 018 ***150.00

i. Corporation	i i valile			- 1							
WORLD	OPTICAL III, INC.										
					1111						(C)
Principal Plac	e of Business Mailing Address				, []	1001 IIO 1011I	19911 89111	##### ## #############################		JUL # 8 (8)	81 E81 188
4985 W-ATLAN			- 1								
DELRAY BEACH FL 33445				DO NOT WRITE IN THIS SPACE						^E	
-US	-05			-	. O-t- 1				Ş SPAI	<u></u> -	
					 Date inco 10/20/1 	-	or Qualifer				
2. Principal P	lace of Business , 2a. Mailing Address		_		4. FEI Numb	per				Арр	lied For
21 88	28 .state Rd 28 8828 sto:	te		1. k	65-079	0348 _				Not	Applicable
Suite, Apt.					5. Certifcate	of Status	Desired			3.75 Ac	
27 84 27 84					o. Certificate	UI SIAIUS	Desired			Fee Req	uired
City & Stat	e City & State		1	-	6. Election (Campaign	Financing	, _	\$	5.00 N	flay Be
23 Davie, FLORIDA 28 Davie, Flor				λ .	Trust Fun	d Contribu	ition .		/	Added to	Fees
Zip	Country Zip	Country	_ ^		B. This corp	oration ow	es the cu	rrent year Ir			_
24 333	24 25 USA 29 33324 30	<u>u.</u>	S.A	<u>\ </u>		Property T			_\QY		No
	9. Name and Address of Current Registered Agent			1	0. Name an	d Addres	s of New	Registered	i Agen	<u>t </u>	
	IOATT MONIEC I	81	Name				•				
ADDICOTT, MICHAEL L			82 Street Address (P.O. Box Number is Not Acceptable)								
450 N. PARK RD. STE. 805					` •						
HOLLYWOOD FL 33021		83									
		84	City		**				85	Zip Co	ode
								FI	┕╽	l	
11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida. Such change was author	he above	e-named o	corporat	ion submits t	his statem	ent for the	e purpose o	of chang pintmen	jing its r it as red	egistered stered
office or r agent. I a	egistered agent, or both, in the State of Florida. Such change was author m familiar with, and accept the obligations of, Section 607.0505, Florida	Statutes.	une corpo	Manons	DOZIG OF GIRE	,0,010.1110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
SIGNATURE											
	Signature, typed or printed name of registered agent and title if applicable (NOTE: Regi		t signature re	equired whe	n reinstating)	a (GLIANIC	E0 TO 0	FFICERS A	ND DI	ECTO	S IN 12
12.	OFFICERS AND DIRECTORS	13.			ADDITION	S/CHANG	ES IOO	FFICERS A		Change	Addition
TITLE	D DELETE	1.1 TITLE							L),	Hange	
NAME	HARRIS, RUSK	1.2 NAME		0	328	-	ate	· Rd	l. 5	34	
STREET ADDRESS	4985 W. ATLANTIC AVE:	1.3 STREET	ADDRESS	20.5	2010	()	~ (-	227:	oil.		
CITY-ST-ZIP	_DELRAY BEACH FL 33445	14 CITY-ST	T-ZIP	Do	<u>we</u>		<u> </u>	> >>	77	hange	Addition
TITLE		2.1 TITLE								mango .	☐ \\(\frac{1}{2} \text{CO000011} \)
NAME		2.2 NAME									ļ
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CITY-ST-ZIP		2. 4 CITY-S	T-ZIP	-					<u> </u>	Change	Addition
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NAME		3.2 NAME									
STREET ADDRESS		3.3 STREET	ADDRESS								
CITY-ST-ZIP		3.4. CITY-S	T-ZIP		-10-					hones	☐ Addition
TITLE	☐ DELETE	4.1 TITLE	i						\Box	Change	☐ Addition

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 of a pattachment with an address, with all other like empowered. CITY-ST-ZIP

4.3 STREET ADORESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE

☐ Addition

Addition

☐ Change

Change