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 # P98000105516

1. Corporation Name

EYETEMS INTERNATIONAL NO. 100, INC.

Principal Place of Business

Mailing Address

May 05, 1999 8:00 am Secretary of State

05-05-1999 90069 035 ***158.75



•				
80 W. PALMETTO PARK RD S-106 7280 W. PALMETTO PARK RD S-106 CA RATON FL 33433 BOCA RATON FL 33433		6	DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualifed	
			12/17/1998	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1801 Clint moore Rd		31-1959	(9-3543705	Not Applicable
Suite, Apt. #, etc. 2 Suite 202	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 3 BOCO Raton FL	City & State 28 Boca Rator	\ FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country		untry	8. This corporation owes the current year In	tangible
4 33487 25 USA	29 33481 30 (12A	Personal Property Tax.	∐Yes □No
9. Name and Address of Current I	10. Name and Address of New Registered Agent			
		81 Name		
CLAIRE, ROBERT I				
7280 W. PALMETTO PARK RD., S-106 BOCA RATON FL 33433		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 (NOTE: Registered Agent signature required when reinstation)				
Signature, typed or printed name or registered agent and the in applicable. (ICOTE, registered Agent algorithms required in applicable)				
42 OFFICERS AND	DIDECTORS 13		ADDITIONS/CHANGES TO DEFICERS A	ND DIRECTORS IN 12

Addition ☐ Change DELETE 1.1 TITLE **PSTD** TITLE 1.2 NAME NAME GODUR, ELLEN F 7280 W. PALMETTO PARK RD., S-106 STREET ADDRES 1.3 STREET ADDRESS **BOCA RATON FL 33433** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE TITLE 2.1 TITLE Jaine Godu NAME 7280 W. Palmetto Park Rd; S-106 2.3 STREET ADORESS STREET ADDRESS Boca Raton FL 33433 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE ☐ Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE ☐ Change Addition | 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 the receiver of the corporation or the receiver or the receiver of the corporation of the receiver of the corporation or the receiver of the corporation or the receiver of the corporation of the receiver of the corporation or the receiver of the corporation of the receiver of the receiver of

SIGNATURE