

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90042 020 ***150.00

DOCUMENT # P98000108001

1. Entity Name
MYOPTIX INT'L., INC.



Principal Place of Business
**760 OCEAN DR.
MIAMI BEACH, FL 33139**

Mailing Address
**760 OCEAN DR.
MIAMI BEACH, FL 33139**

40019481



02062007 No Chg-P C:R2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0884758** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LOGINS, DIMITRY
21205 NE 37 AVE, # 808
MIAMI, FL 33180**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **LOGINS, DIMITRY** *21205 NE 37 AVE, # 808*
STREET ADDRESS **3701 NORTH COUNTRY DRIVE #1008**
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 06 2007

Date

305 534 8828

Daytime Phone #