

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 AM 8:36

DOCUMENT # S50636

(7)

1. Corporation Name

J.B. EYEWEAR INC.

Principal Place of Business

8000 N.W. 31ST ST.
SUITE #19
MIAMI FL 33122

Mailing Address

8000 N.W. 31ST ST.
SUITE #19
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/07/1991

3a. Date of Last Report

05/24/1994

4. FEI Number

65-0267118

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. This corporation has liability for intangible tax under S. 199.03?

Florida Statutes

☐ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

KIM, JAE B.
8000 N.W. 31 STREET
SUITE #19
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name

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

(Signature typed or printed name of registered agent and title if applicable)

(If 2011 Registered Agent Signature Required, After Incubation)

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

P
KIM, JAE B
16840 NW 80TH COURT
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

S
KIM, MIA L
16840 NW 80TH COURT
MIAMI FL

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (If 11)

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST., ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST., ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST., ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST., ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST., ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST., ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.01(4)(b), 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 199, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joe B. Kim

Joe B. Kim

1-12-95

305) 499-4024

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Signature Block 8