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

PROFIT , CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morlham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # S54983

(9)

ALL ABOUT EYES TOO, INC.

FILED Mar 18 1996 8:00 am Secretary of State



Principal Place of Business		Mailing Address			
11484 SW QU MIAMI FL 331	UAIL ROOST DR 157	11484 SW OUAIL Miami FL 33157	ROOST DR		
				3. Date Incorporated or Qualified	3a. Date of Last Report
				05/24/1991	05/01/1995
2. Principal Pla	nce of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0261064	Not Applicable
Suite, Apt. #	i, etc.	Suite, Apt. #, etc	G.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		City & State		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
23 Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24 .	25	29	30	Florida Statutes Yes	
	9. Name and Address of Curre			10. Name and Address of New R	egistered Agent
3			81 Nanie	STANLEY JOHN	SON ATTORNEY ATT
CALVIN	, arthur B.				
	ALZEDO ST		L	ddress (P.O. Box Number is Not Acceptable) Light BISCAMNE	BCIS. # LLI
SUITE 2			83	miami F1	or BA
	GABLES FL 33134		84 City	, , , , , , , , , , , , , , , , , , , ,	85 Zip Code
					FL '
11. Pursuant to	o the provisions of Sections 607.050	2 and 607.1508, Florida S	statutes, the above named con	rporation submits this statement for the pur	pose of changing its registered office pintment as registered agent. I am
or registere	ed agent, or both, in the State of Flor th, and agcent to- obligations of, Sec	ioa. Such change was aut :hop:1907.0505, Florida/Sta	inonzed by the corporation sit atutes.	rporation submits this statement for the pur board of directors. Thereby accept the appr	- 10.101
	Marken C.	West to	Fing STANLO	Y & JOHNSON, 30.	3/14/16
SIGNATURE .	Signature, typed or profed name of registered as	it and title if applicable	A	quied when rendating)	10/2
12.	OFFICEPS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	Change Addition
TITLE	P	DELETE		PRESIDENIT	
NAME	EULAH, GREENE		1.2 NAME	RHONDA VEGRASA 11484 Quail Ro MIRMI, Fr.	Sincy
STREET ADDRESS	11484 SW QUAIL ROOST D	OR.	1.3 STREET ADDRESS	11484 Quart 100	30 5A
CITY-ST-7IP	MIAMI FL		1.4 CITY - ST - ZIP	mismi, m.	Change Addition
TITLE	CEO	DELETE			Change Addition
NAME	VEERASAWMY, RHONDA		2.2 NAME		
STREET ADDRESS	11484 QUAIL ROOST DRIVE	E	- 2.3 STHEET ADDRESS		
CITY-SI-ZIP	MIAMI FL 33157	— DD DD CTO	2 4 CITY-S1-ZIP		☐ Change ☐ Addition
TITLE	DM	DELETE	1		
NAME	VEERASAWMY, RHONDA	-	3.2 NAME		
STREET ADDRESS	11484 QUAIL ROOST DRIV	t .	3.3 STHEET ADDRESS		
CITY - ST- ZIP	MIAMI FL 33157	DELETE	3.4 City-St-ZiP 4.1 I/StF	900001-74 -03/20/96010	Change Addition
TIBLE		L') pere is			111001
NAME			4.2 NAME 4.3 STREET ADDRESS	***208.75	
STREET ADDRESS					
CITY - ST - ZIP		DELETE	4.4 CITY+S1-ZIP 5 1 TILE	TYP DO	Change Addition
TITLE		☐ perest	5 2 NAME	m. 11 (.	
NAME				3-19-9	16
			5.3 STREET ADDRESS	3-19-7	Ψ
STREET ADDRESS					
CITY+ST-ZIP		F DEFE	54 CITY - \$1 - 71° 6 1 TIU F		Change Addition
CITY+ST-ZIP TITLE		☐ DELET	E 6 1 TITLE		Change Addition
CITY+ST-ZIP TITLE NAME		DELET!	E 6 1 TITLE 6 2 NAME		Change Addition
CITY+ST-ZIP TITLE		☐ DELEN	E 6 1 TITLE		Change Addition

4. Too hereby certify that the information supplied with this tiling is voluntarily furnished and does not quarily for the exemption stated in section 1 Hz/76/kg, indica Statutes. 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 on an attachment with an address.

SIGNATURE:

THE NAME OF SIGNING OFFICER OF DIRECTOR

sident

2-15-96

Daytine Pingy (7-9)