

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 FEB 15 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V73694

1. Corporation Name

SUNGLASSES UNLIMITED, INC.

Principal Place of Business

7468 Republic Drive
Orlando, FL 32819

Mailing Address

7468 Republic Drive
Orlando, FL 32819

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/19/92	3a. Date of Last Report 04/14/94
4. FEI Number 59-3155295	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

BARCO, CARROLL S.
6220 S. ORANGE BLOSSOM TRAIL
SUITE 194
ORLANDO, FLORIDA 32809

10. Name and Address of New Registered Agent

81 Name PHILIP F. BONUS, ESQUIRE	85 Zip Code 32801
82 Street Address (P.O. Box Number is Not Acceptable) 170 EAST WASHINGTON STREET	
83	
84 City ORLANDO	FL

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

Philip F. Bonus

(NOTE: Registered Agent signature required when reinstating)

DATE

2/5/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/P/S/T	1.1 TITLE	☐ Change ☐ Addition
NAME	LINDA J. PALMER	1.2 NAME	000001408130
STREET ADDRESS	7468 REPUBLIC DRIVE	1.3 STREET ADDRESS	-02/16/95--01082--010
CITY-ST-ZIP	ORLANDO, FLORIDA 32819	1.4 CITY-ST-ZIP	****208.75 ****208.75
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

Linda J. Palmer

LINDA J. PALMER

1/30/95

(407)354-2110

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature Printed Name

2-15-95