

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000113359

**Entity Name:** MANUFACTURER DIRECT EYEWEAR, INC.

**Current Principal Place of Business:**

142 WEST HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

142 WEST HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**FEI Number:** 20-0308217

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LOMBARDI, JOHN L  
142 WEST HILLSBORO BOULEVARD  
DEERFIELD BEACH, FL 33441 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name LOMBARDI, JOHN  
Address 142 WEST HILLSBORO BLVD  
City-State-Zip: DEERFIELD BEACH FL 33441

Title VD  
Name LOMBARDI, ROBIN  
Address 142 WEST HILLSBORO BLVD  
City-State-Zip: DEERFIELD BEACH FL 33441

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN LOMBARDI

PD

02/21/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date