

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092632

Entity Name: FLORIDA OCULAR PROSTHETICS, INC.

Current Principal Place of Business:

967 SE FEDERAL HWY
STUART, FL 34994

Current Mailing Address:

967 SE FEDERAL HWY
STUART, FL 34994 US

FEI Number: 41-2140115

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHNSON, THOMAS N
967 SE FEDERAL HWY
STUART, FL 34994 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: BREND A H JOHNSON

04/01/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P/OWNER
Name JOHNSON, THOMAS N
Address 967 SE FEDERAL HWY
City-State-Zip: STUART FL 34994

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: THOMAS N JOHNSON

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date