

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000065529

**Entity Name:** OD EYE INC.

**Current Principal Place of Business:**

14922 64TH CT N  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

14922 64TH CT N  
LOXAHATCHEE, FL 33470 US

**FEI Number:** 45-2802352

**Certificate of Status Desired:** No

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

OWENS, DAWNA M.  
14922 64TH CT N  
LOXAHATCHEE, FL 33470 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:** DAWNA OWENS

01/22/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, T  
Name OWENS, DAWNA M.  
Address 14922 64TH CT N  
City-State-Zip: LOXAHATCHEE FL 33470

Title S, D  
Name OWENS, DAWNA M.  
Address 14922 64TH CT N  
City-State-Zip: LOXAHATCHEE FL 33470

Title DIRECTOR  
Name PATCH, ALEX  
Address 14922 64TH CT N  
City-State-Zip: LOXAHATCHEE FL 33470

*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:** DAWNA OWENS

01/22/2023

Electronic Signature of Signing Officer/Director Detail

Date