

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000033034

Entity Name: OPTICON, INC.

Current Principal Place of Business:

5350 NW 35TH AVENUE
FORT LAUDERDALE, FL 33309

Current Mailing Address:

5350 NW 35TH AVENUE
FORT LAUDERDALE, FL 33309

FEI Number: 22-3801789

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 SECRETARY, TREASURER,
DIRECTOR
Name SHAW, THOMAS P.
Address 8888 KEYSTONE CROSSING SUITE
600
City-State-Zip: INDIANAPOLIS IN 46240

Title PRESIDENT, DIRECTOR
Name BERKOWITZ, HARVEY
Address 5350 NW 35TH AVENUE
City-State-Zip: FORT LAUDERDALE FL 33309

Title CHAIRMAN, DIRECTOR
Name WOOD, JEFFREY G.
Address 8888 KEYSTONE CROSSING SUITE
600
City-State-Zip: INDIANAPOLIS IN 46240

Title CFO
Name LESICA, ROBERT
Address 5350 NW 35TH AVENUE
City-State-Zip: FORT LAUDERDALE FL 33309

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 P. SHAW

SECRETARY

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date