2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2019
Secretary of State
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Entity Name: SIGHT SUPPLY INC.

Current Principal Place of Business:

2222 PONCE DE LEON BLVD.
STE. 300
CORAL GABLES, FL 33134

Current Mailing Address:

2222 PONCE DE LEON BLVD.
STE. 300
CORAL GABLES, FL 33134 US

FEI Number: 82-2145194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRAVIESO, ANTHONY R
2222 PONCE DE LEON BLVD.
STE. 300
CORAL GABLES, FL 33134 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	CEO, PRESIDENT	Title	CFO, SECRETARY
Name	TRAVIESO, ANTHONY RENE	Name	SCHWENGLER, ALEXANDER RYAN
Address	2222 PONCE DE LEON BLVD. STE. 300	Address	2222 PONCE DE LEON BLVD. STE. 300
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	DIRECTOR	Title	DIRECTOR
Name	SCHULTZ, JIM	Name	DEGROOT, ADAM
Address	2222 PONCE DE LEON BLVD. STE. 300	Address	2222 PONCE DE LEON BLVD. STE. 300
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

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: ANTHONY RENE TRAVIESO CEO 04/02/2019

Electronic Signature of Signing Officer/Director Detail — Date