



BA20221100386

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**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 653-3516

For Office Use Only

**-FILED-**

File No.: BA20221100386

Date Filed: 11/8/2022

Entity Details			
Corporation Name		TARAVAL EYE CARE OPTOMETRY, INC.	
Entity No.		2965638	
Formed In		CALIFORNIA	
Street Address of Principal Office of Corporation			
Principal Address		834 TARAVAL ST SAN FRANCISCO, CA 94116	
Mailing Address of Corporation			
Mailing Address		834 TARAVAL ST SAN FRANCISCO, CA 94116	
Attention			
Street Address of California Office of Corporation			
Street Address of California Office		834 TARAVAL ST SAN FRANCISCO, CA 94116	
Officers			
Officer Name	Officer Address	Position(s)	
<input checked="" type="checkbox"/> KYNA WONG	834 TARAVAL ST SAN FRANCISCO, CA 94116	Chief Executive Officer, Chief Financial Officer	
<input checked="" type="checkbox"/> Stacie M Low	834 TARAVAL ST SAN FRANCISCO, CA 94116	Secretary	
Additional Officers			
Officer Name	Officer Address	Position	Stated Position
<input checked="" type="checkbox"/> Stacie M Low	834 TARAVAL ST SAN FRANCISCO, CA 94116	Vice President	
Directors			
Director Name	Director Address		
<input checked="" type="checkbox"/> Kyna Wong	834 TARAVAL ST SAN FRANCISCO, CA 94116		
The number of vacancies on Board of Directors is: 0			
Agent for Service of Process			
Agent Name		KYNA WONG	
Agent Address		834 TARAVAL ST SAN FRANCISCO, CA 94116	
Type of Business			
Type of Business		OPTOMETRY	
Email Notifications			
Opt-in Email Notifications		No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.	
Labor Judgment			

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature

☒ By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

*kw*

Signature

*11/08/2022*

Date