	FOR OVA STATEMENT		A DEPARTMENT OF STATE Katherine Harris Secretary of State, IVISION OF CORPORATIONS	FILED	
DOCUMENT # 460170 1. Corporation Name				99 NOV 29 PM 5: 20	
•	REN'S EYE CLINIC, GIA	COMO S	S. GUGGINO, M.D.	SECULE ALL OF STATE TALLAMASSES FLORIDA	
Principal Place of Business		Mailing Address			
3115 SWANN AVE TAMPA FL 33609		3115 SWANN AVE. TAMPA FL 33609			
US If above a	addresses are incorrect in any way, line th	US .		REINSTATEMENT 1999	
2. New Pri	ncipal Office Address, If Applicable	3. New Mail	ing Office Address, If Applicable	Date Incorporated or Qualified To Do Business in Florids 08/26/1974	
Suite, Apt. #, etc. City & State		Sulte, Apt. #, etc. City & State		5. FEI Number Applied For Not Applied For Not Applied For	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED To a Cardificate of Status	
7. Names		/or Director (FI	orida nonprofit corporations must list at les		
Title(s)	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director		
PTD	GUGGINO,GIACOMO S., M.D.	<u>-</u>	3115 SWANN AVE	TAMPA FL	
				6000030713667 -12/15/9901076001 ****750.00 ****750.00	
	8. Name and Address of Curren	t Registered Ag	ent	Name and Address of New Registered Agent	
GUGGINO, GIACOMO S. MD. 3115 SWANN AVE. TAMPA FL 33809			Street Address (F Suite, Apt. #, Etc	P.O. Box Number is Not Acceptable) State Zip Code	
Signature c Registered	Agent <u>Liaconia</u> A	EGISTERED A	oration, am familiar with and accept the oration, am familiar with and accept the oration. SENT MUST SIGN Impowered to execute this application as proposed to execute this application as proposed to execute the application.	FL	

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