

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120616

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** PRECISION EYE CARE LAB LLC

**Current Principal Place of Business:**

2314 W 80 STREET  
BAY 4  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

2314 W 80 STREET  
BAY 4  
HIALEAH, FL 33016 US

**New Mailing Address:**

**FEI Number:** 26-1511800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAMADRID, ALEXIS  
8320 W. SUNRISE BLVD  
STE 202  
PLANTATION, FL 33322 US

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

LAMADRID FINANCIAL SERVICES CORP  
8320 W. SUNRISE BLVD  
STE 202  
PLANTATION, FL 33322 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: LAMADRID FINANCIAL SERVICES CORP

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CABALLERO, JESUS D  
Address: 2427 CENTER GATE DR, APT 201  
City-St-Zip: MIRAMAR, FL 33025 US

Title: MGR  
Name: ACEVEDO, JONATHAN  
Address: 756 NW 170 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: MGR  
Name: DECSA LLC  
Address: 2314 W 8 STREET BAY 4  
City-St-Zip: HIALEAH, FL 33016 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JONATHAN ACEVEDO

MGR

04/30/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date