

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002720

**FILED
Feb 09, 2012
Secretary of State**

Entity Name: EYE CARE AND SURGERY CENTER OF FT LAUDERDALE, LLC

Current Principal Place of Business:

2540 N.E. NINTH STREET
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1097 SW LEJEUNE RD
2ND FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-1344254 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARAN, FERNANDO S
255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ARAN, ALBERT J
Address: 2540 N.E. NINTH STREET
City-St-Zip: FORT LAUDERDALE, FL 33304

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: ALBERTO J ARAN, M.D. MGR 02/09/2012

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