

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000004647

**Entity Name:** LASIK PRO, P.A.

**Current Principal Place of Business:**

105 BONNIE LOCH COURT  
SUITE A  
ORLANDO, FL 32806-1111

**Current Mailing Address:**

105 BONNIE LOCH COURT  
SUITE A  
ORLANDO, FL 32806-1111 US

**FEI Number:** 59-3619148

**Certificate of Status Desired:** No

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

DEN BESTE, BRIAN P.  
105 BONNIE LOCH COURT  
SUITE A  
ORLANDO, FL 32806-1111 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:** BRIAN P. DEN BESTE

03/09/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DEN BESTE, BRIAN P.  
Address        105 BONNIE LOCH COURT SUITE A  
City-State-Zip: ORLANDO FL 32806

*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:** BRIAN DEN BESTE

PRESIDENT

03/09/2018

Electronic Signature of Signing Officer/Director Detail

Date