

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62198

Entity Name: LASERVISION EYE CARE CENTER, INC.

Current Principal Place of Business:

15600 N.W. 67TH AVENUE
SUITE 210
MIAMI LAKES, FL 33014

Current Mailing Address:

15600 N.W. 67TH AVENUE
SUITE 210
MIAMI LAKES, FL 33014

FEI Number: 65-0282405

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAMBRANO, BARBARA
15600 NW 67TH AVE
#210
MIAMI LAKES, FL 33014 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ZAMBRANO,WILLIAM
Address 8627 GLENCAIRN TERRACE
City-State-Zip: MIAMI LAKES FL 33016

Title SECT
Name TRENTACOSTE,JOSEPH
Address 2659 EDGEWATER DRIVE
City-State-Zip: WESTON FL 33332

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: BARBARA ZAMBRANO

ADMINISTRATOR

02/02/2015

Electronic Signature of Signing Officer/Director Detail

Date