## **2013 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

FILED Feb 12, 2013

**Secretary of State** 

CC2803837158

## Officer/Director Detail:

Title PD Title SECT

NameZAMBRANO,WILLIAMNameTRENTACOSTE,JOSEPHAddress8627 GLENCAIRN TERRACEAddress2659 EDGEWATER DRIVE

City-State-Zip: MIAMI LAKES FL 33016 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** 

02/12/2013