

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V19815

**Entity Name:** EYEDEAL VISION CENTER, INC.

**Current Principal Place of Business:**

3948 TOWN CENTER BLVD  
ORLANDO, FL 32837

**Current Mailing Address:**

3948 TOWN CENTER BLVD  
ORLANDO, FL 32837 US

**FEI Number:** 59-3120151

**Certificate of Status Desired:** No

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

SEAMAN, THOMAS  
3948 TOWN CENTER BLVD  
ORLANDO, FL 32837 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            PRESIDENT  
Name            SEAMAN, THOMAS  
Address        3948 TOWN CENTER BLVD  
City-State-Zip: ORLANDO FL 32837

*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:** THOMAS SEAMAN

**PRESIDENT**

**01/12/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date