

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000059515

**Entity Name:** LASER VISION SERVICES, LLC

**Current Principal Place of Business:**

6850 INTERNATIONAL CENTER BLVD.  
FORT MYERS, FL 33912

**Current Mailing Address:**

6850 INTERNATIONAL CENTER BLVD.  
FORT MYERS, FL 33912

**FEI Number:** 42-1707798

**Certificate of Status Desired:** No

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

MINCK, LINDA RESQ.  
5633 STRAND BLVD  
SUITE 314  
NAPLES, FL 34110 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

**Authorized Person(s) Detail :**

Title MGR  
Name PALMON, FLORENTINO E  
Address 6850 INTERNATIONAL CENTER BLVD.  
City-State-Zip: FORT MYERS FL 33912

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FLORENTINO PALMON

**MANAGING MEMBER**

**03/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date