

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002720

Entity Name: EYE CARE AND SURGERY CENTER OF FT LAUDERDALE, LLC

Current Principal Place of Business:

2540 N.E. NINTH STREET
FORT LAUDERDALE, FL 33304

Current Mailing Address:

7300 CORPORATE CENTER DRIVE
SUITE 501
MIAMI, FL 33126 US

FEI Number: 20-1344254

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARAN, FERNANDO S
ARAN CORREA & GUARCH, P.A.
2100 SALZEDO STREET SUITE 303
CORAL GABLES, FL 33134 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	Title	PRESIDENT
Name	ARAN, ALBERT J	Name	STERN , LEE
Address	2540 N.E. NINTH STREET	Address	2540 N.E. NINTH STREET
City-State-Zip:	FORT LAUDERDALE FL 33304	City-State-Zip:	FORT LAUDERDALE FL 33304

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

SIGNATURE: ALBERT J. ARAN

MANAGER

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date