

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004586

Entity Name: EMMETROPE OPHTHALMICS, LLC

Current Principal Place of Business:

104 CRANDON BLVD
#419
KEY BISCAYNE, FL 33149

Current Mailing Address:

104 CRANDON BLVD
#419
KEY BISCAYNE, FL 33149 US

FEI Number: 45-3249706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTO, MYRNA
104 CRANDON BLVD
#419
KEY BISCAYNE, FL 33149 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: MYRNA SOTO

02/24/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GOLDBERG, JEFFREY
Address 4903 PEARLMAN WAY
City-State-Zip: SAN DIEGO CA 92130

Title MGR
Name GOLDBERG, ROGER
Address 15 GABLE LANE
City-State-Zip: LAFAYETTE CA 94549

Title VP
Name LEISCHNER, STEVEN
Address 1979 DOGWOOD DRIVE
City-State-Zip: SCOTCH PLAINS NJ 07076

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: STEVEN LEISCHNER

VICE PRESIDENT

02/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date