

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604958

FILED
Jan 27, 2011
Secretary of State

Entity Name: EDWARD L. BUDD O.D., DR. OF OPTOMETRY, PA

Current Principal Place of Business:

C/O EDWARD L. BUDD, O.D.
377 N. KROME AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

C/O EDWARD L. BUDD, O.D.
377 N. KROME AVE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 59-1508785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUDD, EDWARD L.
377 NORTH KROME AVENUE
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: BUDD, EDWARD L.
Address: 377 N. KROME AVE.
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: BUDD, MIMI
Address: 377 N. KROME AVE.
City-St-Zip: HOMESTEAD, FL 33030 US

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: EDWARD L BUDD OD

PRES

01/27/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date