

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 605926

FILED  
Mar 18, 2005  
Secretary of State

Entity Name: DR. KLEIN, OPTOMETRY, P.A.

## Current Principal Place of Business:

2502 EAST OAKLAND PK BLVD  
FT LAUDERDALE, FL 33306

## New Principal Place of Business:

## Current Mailing Address:

2502 EAST OAKLAND PK BLVD  
FT LAUDERDALE, FL 33306

## New Mailing Address:

FEI Number: 59-1884998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLEIN, PAUL  
2502 E. OAKLAND PK., BLVD.  
FT. LAUDERDALE, FL 33306 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: KLEIN, PAUL,  
Address: 2502 E OAKLAND PK BLVD  
City-St-Zip: FT LAUDERDALE, FL 33306 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAUL KLEIN

PRES

03/18/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date