

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# G50932

Entity Name: MIAMI EYE CENTER, INC.

**FILED**  
**Nov 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

619 NW 12TH AVE  
MIAMI, FL 331363689

**New Principal Place of Business:**

**Current Mailing Address:**

619 NW 12TH AVE  
MIAMI, FL 331363689

**New Mailing Address:**

7305 VISTALMAR STREET  
CORAL GABLES, FL 33143

FEI Number: 65-0020033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GELBER, EDWARD C MD  
275 SOLANO PRADO  
MIAMI, FL 331562351 US

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

NOBBE, DENNIS  
7305 VISTALMAR STREET  
CORAL GABLES, FL 33143 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: DENNIS C NOBBE

11/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NOBBE, DENNIS C.  
Address: 7305 VISTALMAR STREET  
City-St-Zip: CORAL GABLES, FL 33143

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: DENNIS C. NOBBE

P

11/16/2012

Electronic Signature of Signing Officer or Director

Date