2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

DOCUMENT# J44052

Entity Name: JILL MARROTTE, O.D, P.A.

Current Principal Place of Business:

LAS OLAS LASER EYE CENTER
450 E LAS OLAS BLVD
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

LAS OLAS LASER EYE CENTER
2300 N. COMMERCE PKWY, SUITE 108
WESTON, FL 33326 US

Current Mailing Address:

DR JILL MARROTTE
10229 LEXINGTON ESTATES BLVD
BOCA RATON, FL 33428 US

New Mailing Address:

FEI Number: 59-2736927 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARROTTE, JILL
10229 LEXINGTON ESTE. BLVD
BOCA RATON, FL 33428 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: DP ( ) Delete
Name: MARROTTE, JILL,
Address: 10229 LEXINGTON ESTS. BLVD
City-St-Zip: BOCA RATON, FL 33428

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 Chapter 119, 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: JILL MARROTTE DP 04/20/2007

Electronic Signature of Signing Officer or Director — Date