

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000066951

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** AVENTURA LASER CENTER, LLC

**Current Principal Place of Business:**

21110 BISCAYNE BOULEVARD  
STE 312  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

21110 BISCAYNE BOULEVARD  
STE 312  
AVENTURA, FL 33180 US

**New Mailing Address:**

**FEI Number:** 59-3810672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EISENBERG, STEVEN D CPA  
13790 NW 4TH ST  
STE 100  
SUNRISE, FL 33325 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** DR  
**Name:** GRABOIS, B MITCHELL MD  
**Address:** 21110 BISCAYNE BOULEVARD  
**City-St-Zip:** AVENTURA, FL 33180 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** B MITCHELL GRABOIS MD

**PRES**

**01/23/2012**

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date