

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120617

FILED
Jan 12, 2012
Secretary of State

Entity Name: SCHATZ NEURO-OPHTHALMOLOGY, LLC

Current Principal Place of Business:

4701 N MERIDIAN AVENUE
SUITE 500
MIAMI BEACH, FL 33140

New Principal Place of Business:

4302 ALTON ROAD SIMON BUILDING
SUITE 845
MIAMI BEACH, FL 33140

Current Mailing Address:

4701 N MERIDIAN AVENUE
SUITE 500
MIAMI BEACH, FL 33140

New Mailing Address:

4302 ALTON ROAD SIMON BUILDING
SUITE 845
MIAMI BEACH, FL 33140

FEI Number: 65-0941180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMON, GARY P
9500 S DADELAND BLVD
SUITE 708
MIAMI, FL 331562849 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: SCHATZ, NORMAN J MD
Address: 4302 ALTON ROAD SIMON BUILDING SUITE 845
City-St-Zip: MIAMI BEACH, FL 33140

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: NORMAN J SCHATZ

MD

01/12/2012

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