

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000119520

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Entity Name:** BOB YIP, O.D. AND ASSOCIATES, P.A.

**Current Principal Place of Business:**

1936 DEERVIEW PLACE  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

1936 DEERVIEW PLACE  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** 59-3760430

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LYNN, BRIAN CPA  
2 SOUTH UNIVERSITY DRIVE  
FORT LAUDERDALE, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: YIP, BOB Y  
Address: 1936 DEERVIEW PLACE  
City-St-Zip: LONGWOOD, FL 32750

Title: VD  
Name: YIP, LILY  
Address: 1936 DEERVIEW PLACE  
City-St-Zip: LONGWOOD, FL 32750

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: BOB YIP

PD

04/24/2011

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

\_\_\_\_\_  
Date