

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000009764

FILED
Apr 03, 2009
Secretary of State

Entity Name: PHYSICIANS LASER CENTER, INC

Current Principal Place of Business:

905 EAST HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

905 EAST HILLSBORO BLVD
DEERFEILD BEACH, FL 33441

New Mailing Address:

FEI Number: 13-4336762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, JEREMIAH
8557 BOCA RIO DRIVE
BOCA RATON, FL 33433 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: PT () Delete
Name: STEVENS, JEREMIAH
Address: 8557 BOCA RIO DRIVE
City-St-Zip: BOCA RATON, FL 33433

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 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: JEREMIAH STEVENS

PT

04/03/2009

Electronic Signature of Signing Officer or Director

Date