

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010608

FILED  
Jan 07, 2012  
Secretary of State

**Entity Name:** PREMIER EYE CLINIC, P.A.

**Current Principal Place of Business:**

3641 S. CLYDE MORRIS BLVD  
SUITE #500  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

**Current Mailing Address:**

3641 S. CLYDE MORRIS BLVD  
SUITE #500  
PORT ORANGE, FL 32129

**New Mailing Address:**

FEI Number: 30-0399478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

XIA, JIAN Y PHD  
18136 CADENCE STREET  
ORLANDO, FL 32820 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: DR  
Name: GE, QING M.D.  
Address: 3641 S. CLYDE MORRIS, SUITE #500  
City-St-Zip: PORT ORANGE, FL 32129

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: QING GE

DR

01/07/2012

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

\_\_\_\_\_  
Date