

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

03-14-2008 90041 009 \*\*\*150.00

**DOCUMENT # P07000130430**

1. Entity Name

ERIC PEREZ, O.D., P.A.



Principal Place of Business

2849 COLUMBUS AVE.  
CLERMONT FL 34715

Mailing Address

2849 COLUMBUS AVE.  
CLERMONT FL 34715

2. Principal Place of Business - No P.O. Box #

15161 Masthead Landing Cir  
Suite, Apt. #, etc.  
Winter Garden, FL 34787  
City & State

3. Mailing Address

15161 Masthead Landing Cir  
Suite, Apt. #, etc.  
Winter Garden, FL  
City & State

1st MOORE

CR2E034 (10/07)

4



4. FE# Number

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PEREZ, ERIC OD  
2849 COLUMBUS AVE.  
CLERMONT FL 34715

7. Name and Address of New Registered Agent

Name: Perez, Eric OD  
Street Address (P.O. Box Number is Not Acceptable)  
15161 Masthead Landing Cir  
Winter Garden  
City: FL Zip Code: 34787

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and 161516130430

(NOTE: Registered Agent signature required when restructuring)

DATE

**FILE NOW!!! - FEE IS \$150.00**

**After May 1, 2008 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE: D  
NAME: PEREZ, ERIC OD  
STREET ADDRESS: 2849 COLUMBUS AVE.  
CITY-ST-ZIP: CLERMONT FL 34715

TITLE: ☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Delete

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STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Eric Perez, O.D. ☒ Change ☐ Addition  
NAME:   
STREET ADDRESS: 15161 Masthead Landing Cir  
CITY-ST-ZIP: Winter Garden, FL 34787

TITLE: ☐ Change ☐ Addition  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Change ☐ Addition

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NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric Perez

3/4/08

954-559-4384