

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000038393

**Entity Name:** BHAKTA OPTOMETRIC, INC.

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5875 LAKE WORTH RD  
GREENACRES, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

5875 LAKE WORTH RD  
GREENACRES, FL 33463 US

**New Mailing Address:**

**FEI Number:** 26-4751859

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BHAKTA, HETEL  
5875 LAKE WORTH RD  
GREENACRES, FL 33463 US

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

BHAKTA OPTOMETRIC, INC.  
5875 LAKE WORTH RD  
GREENACRES, FL 33463 US

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: HETEL BHAKTA

04/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MS  
Name: BHAKTA, HETEL  
Address: 5875 LAKE WORTH RD  
City-St-Zip: GREENACRES, FL 33463 US

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: HETEL BHAKTA

DR.

04/23/2012

Electronic Signature of Signing Officer or Director

Date