## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P94000004116 (7)

VERO EYE CENTER, INC.

	LIE OUNTER, INO.		ulma Asishaes							
Principal Place of		Ma	aling Address							
70 ROYAL PAL BLVD. VERO BEACH FL 32960			70 ROYAL PAL BLVI VERO BEACH FL 32							
VENU DENO	W FE 02000		Tene penon ve se				3. Date incorporated or Qualified 01/07/1994	<b>3a</b> . D	ate of Last F 04/13/1	
2. Principal Plac	ne of Business	2a.	Mailing Address				4. FEI Number			Applied For
21	,0 0. Buc. 1960	26	Ū				65-0562646			Not Applicable
Suite Apt. #,	etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>.</b>	5 Additional Required
22		27	O. C. Chata				6. Election Campaign Financing			00 May Be
Crty & State		28	City & State				Trust Fund Contribution			ed to Fees
23 Zip	Country	201	Zip	Cour	ntry		8. This corporation has liability for	intang bl	e tax under s	199.032,
24	25	29		30				□ No		
	9. Name and Address of Curre	nt Regis	tered Agent			::	10. Name and Address of New I	legister	ed Agent	
					81	Name				
BRANIGAN, EDWARD S III				B2 Street Ac			ress (P.O. Box Number is Not Accepta	ole)		
70 ROYAL PAL BLVD. VERO BEACH FL 32960				}	83					
AFHO E	SEACH PL 32900								Too I 7	ip Code
					84	City		F	FL  85   Z	up Code
familiär with	is agent, or both, in the State of Fish, in, and accept the obligations of, Society and a preferance of registered up-	tion 607	.0505, Florida Statute	S			and of directors. Thereby accept the applications used the applications are storing to the applications are storing.	DAT	F	
12.	OFFICERS A		CTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A		
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NAME	BRANIGAN, EDWARD S III	, MD		12 N/						
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City-St-ZiP

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an arkivess 4/18/96 (407) & 65-6600 Dayline France

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR