

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90055 032 ***150.00

DOCUMENT # P94000004744 1. Entity Name ERIC L. BRODSKY O.D. & ASSOCIATES, P.A.			
Principal Place of Business 3252 DAVIE BLVD. FT. LAUDERDALE, FL 33312 US		Mailing Address 3252 DAVIE BLVD. FT. LAUDERDALE, FL 33312 US	
2. Principal Place of Business - No P.O. Box # 4711 Chardonnay Drive		3. Mailing Address P.O. Box 670415	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Coral Springs, FL		City & State Coral Springs, FL	
Zip 33067		Zip 33067	
Country USA		Country USA	
4. FEI Number 59-3215929		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BRODSKY, ERIC L. OD 3252 DAVIE BLVD FT. LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4711 Chardonnay Drive City Coral Springs FL Zip 33067	
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 Eric L. Brodsky, O.D. DATE 05/16/07 <small>Signature of registered agent or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when resigning)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	NAME BRODSKY, ERIC L OD	<input type="checkbox"/> Delete	
STREET ADDRESS 4711 CHARDONNAY DRIVE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY - ST - ZIP CORAL SPRINGS, FL 33067			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY - ST - ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY - ST - ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY - ST - ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY - ST - ZIP 			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Eric L. Brodsky, O.D.		Date: 05/16/07	
Daytime Phone #: 954) 895-4249			