2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2012
Secretary of State

DOCUMENT# P94000074112

Entity Name: CENTER FOR EXCELLENCE IN EYE CARE, P.A.

Current Principal Place of Business:

8940 N. KENDALL DRIVE
STE. 400
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

8940 N. KENDALL DRIVE
STE. 400
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0533762 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETER G GRUBER PA
18001 OLD CUTLER ROAD
SUITE 600
MIAMI, FL 33157 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: P
Name: GABAY, JACK MD
Address: 8940 N. KENDALL DR #400-E
City-St-Zip: MIAMI, FL 33176

Title: VP
Name: BUZNEGO, CARLOS MD
Address: 8940 N. KENDALL DR #400-E
City-St-Zip: MIAMI, FL 33176

Title: S
Name: SPEKTOR, FRANK MD
Address: 8940 N. KENDALL DRIVE #400-E
City-St-Zip: MIAMI, FL 33176

Title: T
Name: KASNER, LOUIS MD
Address: 8940 N. KENDALL DRIVE #400-E
City-St-Zip: MIAMI, FL 33176

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: JACK GABAY MD P 02/16/2012

Electronic Signature of Signing Officer or Director Date