

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000029126

Entity Name: BETANCOURT-MCIVER OD, PA.

FILED
Apr 28, 2011
Secretary of State

Current Principal Place of Business:

PINES VISION CARE
17782 SW 2ND ST.
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

17782 SW 2ND STREET
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

1206 MEADOWS BLVD
FT LAUDERDALE, FL 33327 US

New Mailing Address:

17782 SW 2ND STREET
PEMBROKE PINES, FL 33029 US

FEI Number: 65-0571336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETANCOURT-MCIVER, LILIANA
1206 MEADOWS BLVD
FT LAUDERDALE, FL 33327 US

Name and Address of New Registered Agent:

BETANCOURT-MCIVER, LILIANA
17782 SW 2ND STREET
FT LAUDERDALE, FL 33327 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:

Electronic Signature of Registered Agent

04/28/2011

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BETANCOURT-MCIVER, LILIANA
Address: 1206 MEADOWS BLVD
City-St-Zip: FT LAUDERDALE, FL 33327

Title: T
Name: MCIVER, IAIN S
Address: 1206 MEADOWS BLVD
City-St-Zip: FT LAUDERDALE, FL 33327 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: IAIN STUART MCIVER

Electronic Signature of Signing Officer or Director

T

04/28/2011

Date