2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2012
Secretary of State

DOCUMENT# P95000087975

Entity Name: COMPREHENSIVE EYE CARE OF SOUTH FLORIDA INC

Current Principal Place of Business:

7480 FAIRWAY DRIVE
SUITE 105
MIAMI LAKES, FL 33014

New Principal Place of Business:

7480 FAIRWAY DRIVE
SUITE 105
MIAMI LAKES, FL 33014 UN

Current Mailing Address:

7480 FAIRWAY DRIVE
SUITE 105
MIAMI LAKES, FL 33014

New Mailing Address:

7480 FAIRWAY DRIVE
SUITE 105
MIAMI LAKES, FL 33014 UN

FEI Number: 65-0624631 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORDON, MICHAEL
7480 FAIRWAY DRIVE
SUITE 105
MIAMI LAKES, FL 33014 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: PTD
Name: GORDON, MICHAEL M DR.
Address: 7480 FAIRWAY DRIVE, SUITE 105
City-St-Zip: MIAMI LAKES, FL 33014

Title: VSD
Name: BERMAN, GARY M DR.
Address: 7480 FAIRWAY DRIVE, SUITE 105
City-St-Zip: MIAMI LAKES, FL 33014

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: MICHAEL GORDON PTD 02/23/2012

Electronic Signature of Signing Officer or Director Date