2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

LARGO FL 33770

- 1345 WEST BAY DRIVE

P96000097127 DOCUMENT

1. Entity Name

Principal Place of Business

1015 WEST BAY DRIVE

LARGO FL 33770

THE LASER EYE INSTITUTE, INC.



FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90340 039 ***150.00

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Suite, Apl. #, etc. City & Strate City & C	2. Principal Place of Business		3. Mail	3. Mailing Address 148 1344 SH SW				 	HI 60 111 66 113		17 0 17 1907 1927	
Addition Zig Country Zig Country Zig Country Signature 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUGGLES, THOMAS W 633 INDIAN ROCKS ROAD Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zi			<u> </u>				CHECK HERE IF MAKING CHANGES					
S. Certificate of Status Desired Fee Required	City & State		City & State				4. FEI Number 59-3415418			├		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SPATUZE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR