

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000044187

Entity Name: INSIGHT LASER AFFILIATES, P.A.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

1601 SAWGRASS CORP PKWY
SUITE 410
SUNRISE, FL 33323

New Principal Place of Business:

1601 SAWGRASS CORP PKWY
SUITE 410
SUNRISE, FL 33323

Current Mailing Address:

New Mailing Address:

FEI Number: 65-0839889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESSNER, CORY M M.D.
401 FAN PALM WAY
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

LESSNER, CORY M
401 FAN PALM WAY
PLANTATION, FL 33324 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: CORY M. LESSNER, MD

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR. () Delete
Name: LESSNER, CORY M MD
Address: 401 FAN PALM WAY
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: LESSNER, CORY M
Address: 401 FAN PALM WAY
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CORY M. LESSNER

DR.

04/17/2009

Electronic Signature of Signing Officer or Director

Date