PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90076 040 ***150.00

DOCUMENT # P98000093620

1. Corporation Name

STREET ADDRESS

EYE CA	HE ASSUCIATES OF WEST	MELBOUK	NE, P.A.								
Principal Plac	e of Business	Mailing A	ddress						,94 iiii e	11811 2411 -241	
3200 NORTH WICKHAM ROAD, SLITE 1 3200 NORTH WICKHAM ROAD					E 1						
MELBOURNE FL 32935 MELBOURNE FL 32935							DO NOT WRITE IN THIS SPACE				
							3. Date incorporated or Qualifed				}
							11/02/1998		• .		
2 Principal P	Place of Business	2a. Mailin	a Address				4, FEI Number		Apr	plied For	1
21	ace of odd files	26	9				1			Applicable	1 .
Sulte, Apt.	# etc.		Apt. #, etc.						\$8.75 A	dditional	1
22	and the second of the second o	27					5. Certificate of Status Desired	W	Fee Re	quired	J
City & Sta	te .	City &	State				6. Election Campaign Financing	3	\$5.00	May Be	<u>] </u>
23		28					Trust Fund Contribution		Added to	o Fees	ļ
Zip	Country	Zlp		Coun	ilry		8. This corporation owes the current				ĺ
24	25	29	3	0]			Personal Property Tax.			UN0	ļ
	9. Name and Address of Current	Registered A	gent				10. Name and Address of New Reg	lstered A	gent		┨
MEA	L. TERRY L O.D.			J'	81 1	lame]
	o north wickham road, suite	: 1		Ī	82 S	treet Addre	ss (P.O. Box Number is Not Acceptable	B)			
	BOURNE FL 32935			\	_						1
MEL	BUUNNE FL 32839			[1	83						İ
				<u> </u>	84 0	ity			85 Zip C	ode	1
								<u>FL</u>			ł
office or a	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	i Fiorida, Suci	n change was auu	nonzeu	DY INC	med corpo corporation	rapon submits this statement for the pun's board of directors. I hereby accept t	he appoint	weug as reg	jistered	
SIGNATURE					· .			DATE			۔ ا
40	Signature, typed or printed name of registered agent OFFICERS AND			13.	Agent sig	inspire redinited	when rematering) ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	11/08/
TILE	President	DIRECTOR	DELETE	13777			ADDITIONAL TO CLASS	221107410	Change	☐ Addition	1 =
NAME				1.2 NAM							1 -
STREET ADDRESS	NEAL TETTY 3200 W. Witkhan	n Rd. *	+ 1	4	EET ADI	AFSS.					103
		32935			Y-ST-ZI	f] 2
TITLE	<u> </u>		COELETE	2.1 1111					Change	☐ Addition	10
NAME	Gregos Anne 3200 N. Wickham			22 NAM		1			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		1
STREET ADDRESS	Gregas Anne	A			4 5				□ or or do		
	1 5200 D. WIGO W.	. Kd. # 1	•		_	ngess					l
CITY-ST-ZIP.	m.11 71	, <i>Kd. # 1</i> 300 <i>32</i>	1	2.3 STR	EET ACK				T. Average		
	Melbourne +L	32935	<u> </u>	23 STR -2.4 C/T	EETADI Y-ST-ZI		· · · ·	<u>, </u>	Change	Addition	{
	Melbourne +L	32935	DELETE	23 STR -2.4 C/T 3.1 T/T/L	EETADI Y-ST-ZI E		<u> </u>	<u>.</u>			-
NAME	Melbourne +L	32935	DELETE	2.3 STR 2.4 C/T 3.1 T/TL 3.2 NAM	EETADI Y-ST-ZI E	<u> </u>				Addition	<u> </u>
NAME STREET ADDRESS	Melbourne, +L Treasurer Mangui Kian, Sha 3200 -n. Wickham	han - Ed. #1	DELETE	23 STR -2.4 C/T 3.1 T/T/L 3.2 NAA 3.3 STR	EETADI Y-ST-ZI E ME	PESS -				Addition	
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NAME STREET NUCRESS CITY-ST-ZIP TITLE	Melbourne, +L Treasurer Mangui Kian, Sha 3200 -n. Wickham	han - Ed. #1	DELETE	23 STR -2.4 C/T 3.1 T/T/L 32 NAM 33 STR 3.4. C/T	EET ADA Y-ST-ZI E ME CET ADA Y-ST-ZI E	PESS -			Change		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Melbourne, +L Treasurer Mangui Kian, Sha 3200 - n: Wicham Melbourne, 7L 3	han - Ed. #1	DELETE	2.3 STR .2.4 C/T 3.1 T/T/L 3.2 NAA 3.3 STR 3.4. C/T/ 4.1 T/T/L 4.2 NAA	Y-ST-ZZ E E EET ADA Y-ST-ZZ E	P P			Change		
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CITY-ST-ZIP 14. Thereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changes. Or on an attachment with an address, with all other like empowered.

8.4 CITY-ST-ZIP

SIGNATURE: