

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059423

FILED
Mar 27, 2012
Secretary of State

Entity Name: WEST COAST MOBILE EYE CARE, INC.

Current Principal Place of Business:

25 W. COLLEGE AVE
SUITE D
RUSKIN, FL 33570 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 585
RUSKIN, FL 33575 US

New Mailing Address:

FEI Number: 65-0937214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUU, LUCIE N DR.
25 W. COLLEGE AVE
SUITE D
RUSKIN, FL 33570 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: P
Name: LUU, LUCIE N DR.
Address: 25 W. COLLEGE AVE, STE D
City-St-Zip: RUSKIN, FL 33570

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: DR LUCIE LUU

P

03/27/2012

Electronic Signature of Signing Officer or Director

Date