FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 27 1996 8:00 am
Secretary of State

DOCUMENT # S58643

1. Corporation Name
Drs. Airala Laser & Cataract Institute, P.A.

Principal Place of Business — Mailing Address
2441 S.W. 37th Avenue
Miami, Florida 33145

3. Date Incorporated or Qualified: 6/11/91
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 36-3771424 — Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
The Prentice-Hall Corporation System, Inc.
1201 Hays Street
Suite 105
Tallahassee, Florida 32301

10. Name and Address of New Registered Agent
81 Name: C T Corporation System
82 Street Address (P.O. Box Number is Not Acceptable): 1311 Executive Center Drive
83: Suite 200
84 City: Tallahassee FL 85 Zip Code: 32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Connie Bryan — CONNIE BRYAN SPECIAL ASSISTANT SECRETARY — DATE: 2-26-96
(Signature of Corporate Officer, Director, Trustee, Receiver, or Other Fiduciary Capacity) (Registered Agent's Signature required when resigning)

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	Delete
President	Manuel Airala, M.D.	2441 S.W. 37th Street	Miami, Florida 33145	☐
Secretary	Manuel Airala, M.D.	2441 S.W. 37th Street	Miami, Florida 33145	☐
Treasurer	Manuel Airala, M.D.	2441 S.W. 37th Street	Miami, Florida 33145	☐
Sole Director	James H. Desnick, M.D.	980 N. Michigan Avenue, Suite 166	Chicago, Illinois 60611	☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Name	Street Address	City-St-Zip	Change	Addition
1.1	1.2	1.3	1.4	☐	☐
2.1	2.2	2.3	2.4	☐	☐
3.1	3.2	3.3	3.4	☐	☐
4.1	4.2	4.3	4.4	☐	☐
5.1	5.2	5.3	5.4	☐	☐
6.1	6.2	6.3	6.4	☐	☐

100001727091
-02/28/96--01095--003
***208.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: By: [signature] — 2-23-1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Manuel Airala, President

CR2E024 (12/95)