

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V01740

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: TAMPA BAY LASER CENTER, INC.

**Current Principal Place of Business:**

13110 60TH ST. N  
CLEARWATER, FL 33760

**New Principal Place of Business:**

**Current Mailing Address:**

13110 60TH ST. N  
CLEARWATER, FL 33760

**New Mailing Address:**

FEI Number: 59-3142649      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MINTON, JOHN  
4045 MOORES LAKE DR.  
DOVER, FL 33527      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MINTON, JOHN,  
Address: 4045 MOORES LAKE DR  
City-St-Zip: DOVER, FL 33527

Title: VP/S ( ) Delete  
Name: CRAIG, REBECCA M  
Address: 3935 ZURICH CT  
City-St-Zip: TAMPA, FL 33618

Title: P ( ) Delete  
Name: SAMORAJCZYK, JOHN  
Address: 5414 LEILAN DR  
City-St-Zip: SAINT PETERSBURG BEACH, FL 33706

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: SAMORAJCZYK, JOHN  
Address: 5414 LEILANI DR  
City-St-Zip: ST. PETE BEACH, FL 33706

I hereby certify that the information supplied with this filing does not qualify for the 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: REBECCA M. CRAIG

VP

04/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date