

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M14300

Entity Name: SOUTH FLORIDA VISION SERVICES, INC.

Current Principal Place of Business:

2900 W. CYPRESS CREEK RD
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FORT LAUDERDALE, FL 33309

Current Mailing Address:

2900 W. CYPRESS CREEK RD
FORT LAUDERDALE, FL 33309

FEI Number: 59-2519226

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COPPOLA, PATRICE M.
2900 W. CYPRESS CREEK
FORT LAUDERDALE, FL 33309 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title	DP	Title	DT
Name	COPPOLA, ROBERT C	Name	COPPOLA, PATRICE
Address	2900 WEST CYPRESS CREEK ROAD	Address	2900 WEST CYPRESS CREEK ROAD
City-State-Zip:	FORT LAUDERDALE FL 33309	City-State-Zip:	FORT LAUDERDALE FL 33309

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: PATRICE COPPOLA

MEMBER

01/09/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date