2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000045029

Entity Name: MIDTOWN EYE CARE, P.A.

Current Principal Place of Business:

599 SOUTH FEDERAL HIGHWAY SUITE 102

DANIA BEACH, FL 33004

Current Mailing Address:

5952 WEST 16TH AVENUE HIALEAH, FL 33012

FEI Number: 20-8826275 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PELTZER, BRADLEY A ADVANCED EYE CARE OF HIALEAH 5952 WEST 16TH AVE HIALEAH, FL 33012 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

FILED Mar 07, 2016

Secretary of State

CC2303851536

Officer/Director Detail:

Title P Title V

Name PELTZER, BRADLEY A Name POMELLA, KERI M

Address ADVANCED EYE CARE OF HIALEAH Address 3552 MAGELLAN CIRCLE 124

City-State-Zip:

ADVENTURA FL 33180

5952 WEST 16TH AVE

City-State-Zip: HIALEAH FL 33012

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

SIGNATURE: BRADLEY PELTZER

Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

PRESIDENT

03/07/2016

Date