## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000033656

Entity Name: MOBILE EYECARE ASSOCIATES, P.A.

**Current Principal Place of Business:** 

10284 NW 47TH STREET SUNRISE. FL 33351

**Current Mailing Address:** 

10284 NW 47TH STREET SUNRISE. FL 33351

FEI Number: 37-1582586 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHESS, ROBERT 10284 NW 47TH STREET SUNRISE, FL 33351 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 Apr 11, 2014

**Secretary of State** 

CC7254790233

## Officer/Director Detail:

Title F

Name BRANSGROVE, RICHARD W Address 4071 WOODRIDGE ROAD

City-State-Zip: MIAMI FL 33131

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: RICHARD BRANSGROVE

**PRES** 

04/11/2014