

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000038659

Entity Name: CLARIN EYE CARE CENTER, P.A.

Current Principal Place of Business:

14429 SOUTH DIXIE HIGHWAY
MIAMI, FL 33176

Current Mailing Address:

14429 SOUTH DIXIE HIGHWAY
MIAMI, FL 33176

FEI Number: 27-0166294

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARIN, ADAM J
14429 SOUTH DIXIE HIGHWAY
MIAMI, FL 33176 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 P
Name CLARIN, ADAM J
Address 14429 SOUTH DIXIE HIGHWAY
City-State-Zip: MIAMI FL 33176

Title ST
Name CLARIN, ADAM J
Address 14429 SOUTH DIXIE HIGHWAY
City-State-Zip: MIAMI FL 33176

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: ADAM CLARIN

PRES

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date