

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000017192

**Entity Name:** BISCAYNE OPTOMETRY, INC.

**Current Principal Place of Business:**

1176 BANTER CIRCLE  
NORTH PORT, FL 34288

**Current Mailing Address:**

1176 BANTER CIRCLE  
NORTH PORT, FL 34288 US

**FEI Number:** 47-3341466

**Certificate of Status Desired:** No

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

TOFFOLI, NICHOLAS  
1176 BANTER CIRCLE  
NORTH PORT, FL 34288 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            PRESIDENT  
Name            TOFFOLI, NICHOLAS  
Address        1176 BANTER CIRCLE  
City-State-Zip: NORTH PORT FL 34288

*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:** NICHOLAS TOFFOLI

**PRESIDENT**

**02/24/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date