

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000088616

Entity Name: STEPHANIE EYE CARE P.A.

Current Principal Place of Business:

19865 SW 130 AVE
MIAMI, FL 33177

Current Mailing Address:

19865 SW 130 AVE
MIAMI, FL 33177 US

FEI Number: 87-3071364

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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 PTSD
Name CASTELLANOS, STEPHANIE
Address 19865 SW 130 AVE
City-State-Zip: MIAMI FL 33177

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: STEPHANIE CASTELLANOS

PTSD

02/26/2024

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date