

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000042600

**Entity Name:** OCULAR SURFACE CENTER, P.A.

**Current Principal Place of Business:**

7000 SW 97 AVE  
STE 213  
MIAMI, FL 33173

**Current Mailing Address:**

7000 SW 97 AVE  
STE 213  
MIAMI, FL 33173 US

**FEI Number:** 65-1149323

**Certificate of Status Desired:** No

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

TSENG, SCHEFFER CMD,PHD  
7000 SW 97TH AVENUE  
SUITE 213  
MIAMI, FL 33173 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, DIRECTOR  
Name            TSENG, SCHEFFER CMD,PHD.  
Address        10000 SW 63 PL  
City-State-Zip: MIAMI FL 33156

Title            SECRETARY, TREASURER,  
                    DIRECTOR  
Name            TSENG, AMY H  
Address        10000 SW 63 PL  
City-State-Zip: MIAMI FL 33156

*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:** AMY TSENG

**TREASURER**

**02/08/2016**

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

\_\_\_\_\_  
Date