

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089936

Entity Name: NORTH MIAMI BEACH EYE CENTER, LLC

Current Principal Place of Business:

2000 NE 164TH ST
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

2000 NE 164TH ST
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 20-1998268

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
2000 NE 164TH ST
NORTH MIAMI BEACH, FL 33162 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

Authorized Person(s) Detail :

Title MGRM
Name EDELMAN, REED S
Address 23480 MIRABELLA CIR S
City-State-Zip: BOCA RATON FL 33433

Title MGRM
Name SHECHTMAN, LEON
Address 3526 JUNIPER LANE
City-State-Zip: DAVIE FL 33330

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEON SHECHTMAN

MGRM

01/17/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date