

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089936

Entity Name: NORTH MIAMI BEACH EYE CENTER, LLC

Current Principal Place of Business:

1950 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

1950 NE 163RD ST
NORTH MIAMI BEACH, FL 33162

FEI Number: 20-1998268

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
1950 NE 163RD 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 1228 NW 144TH TERRACE
City-State-Zip: PEMBROKE PINES FL 33028

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

01/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date