

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000397841

**Entity Name:** NOVA EYES LLC

**Current Principal Place of Business:**

1033 SNELL ISLE BOULEVARD NE  
SAINT PETERSBURG, FL 33704

**Current Mailing Address:**

3625 NW 82 AVE  
SUITE 311  
DORAL, FL 33166 US

**FEI Number:** 37-2107877

**Certificate of Status Desired:** No

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

WONG MORALES, MIGUEL A  
3625 NW 82 AVE  
SUITE 311  
DORAL, FL 33166 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 AMBR  
Name WONG MORALES, MIGUEL A  
Address 3625 NW 82 AVE SUITE 311  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name ESCUDERO GALVEZ, RITA K  
Address 3625 NW 82 AVE SUITE 311  
City-State-Zip: DORAL FL 33166

*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:** MIGUEL A WONG MORALES

AMBR

03/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date