


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90379 019 ***150.00

DOCUMENT # F96000000446

1. Entity Name
TLC THE LASER CENTER (NORTHEAST) INC.



Principal Place of Business
**6701 DEMOCRACY BLVD., SUITE 200
BETHESDA MD 20817**

Mailing Address
**6701 DEMOCRACY BLVD., SUITE 200
BETHESDA MD 20817**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
540 Maryville Centre Dr.
Suite, Apt. #, etc.
200
City & State
St. Louis, MO
Zip
63141
Country
USA

CHECK HERE IF MAKING CHANGES

4. FEI Number **52-1852589** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO VAMVAKAS, ELIAS 5280 SOLAR DR SUITE 300 MISSISSAUGA, ONTARIO L4W 5M 8	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PARK, BRIAN 5280 SOLAR DR SUITE 300 MISSISSAUGA, ONTARIO L4W- 5M8	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD FIORINI, LLOYD 5280 SOLAR DR SUITE 300 MISSISSAUGA, ONTARIO L4W- 5M8	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MUNDI, KAMAL 5280 SOLAR DR SUITE 300 MISSISSAUGA, ONTARIO L4W- 5M8	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President / Director James C. Wachtman 540 Maryville Centre Dr. #200 St. Louis, MO 63141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary / Director Robert W. May 540 Maryville Centre Dr. #200 St. Louis, MO 63141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO / Treasurer B. Charles Bono III 540 Maryville Centre Dr. #200 St. Louis, MO 63141	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **XV Robert W. May / Secretary** 1/17/03 (314) 434-6900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)