

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076267

**FILED**  
**Jan 10, 2007**  
**Secretary of State**

**Entity Name:** ADVANCED SURGICAL ASSOCIATES, P.A.

**Current Principal Place of Business:**

3660 20TH STREET  
VERO BEACH, FL 32960

**New Principal Place of Business:**

13835 U S ONE  
SEBASTIAN, FL 32958

**Current Mailing Address:**

3660 20TH STREET  
VERO BEACH, FL 32960

**New Mailing Address:**

13835 U S ONE  
SEBASTIAN, FL 32958

**FEI Number:** 65-1055581

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHALHOUB, HADI A D.O.  
3660 20TH STREET  
VERO BEACH, FL 32960 US

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

SHALHOUB, HADI A D.O.  
13835 U S ONE  
SEBASTIAN, FL 32958 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:** HADI SHALHOUB

01/10/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DO ( ) Delete  
**Name:** SHALHOUB, HADI A D.O.  
**Address:** 3660 20TH STREET  
**City-St-Zip:** VERO BEACH, FL 32960 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** OWNE (X) Change ( ) Addition  
**Name:** SHALHOUB, HADI A D.O.  
**Address:** 13835 U S ONE  
**City-St-Zip:** SEBASTIAN, FL 32958 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** PEG MCAREE

MGR

01/10/2007

Electronic Signature of Signing Officer or Director

Date