

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100492

Entity Name: QUEST ENDOSCOPY, INC.

FILED  
Jan 21, 2011  
Secretary of State

**Current Principal Place of Business:**

5030 GRAMONT AVE  
ORLANDO, FL 32812 US

**New Principal Place of Business:**

**Current Mailing Address:**

5030 GRAMONT AVE  
ORLANDO, FL 32812 US

**New Mailing Address:**

FEI Number: 20-3185846      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KOHLER, MICHAEL  
Address: 5030 GRAMONT AVE  
City-St-Zip: ORLANDO, FL 32812

Title: D  
Name: KOHLER, MICHAEL  
Address: 5030 GRAMONT AVE  
City-St-Zip: ORLANDO, FL 32812

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 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 all other like empowered.

SIGNATURE: MICHAEL KOHLER

PRES

01/21/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date