2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2019
Secretary of State
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Entity Name: MADORSKY, PINON, BRUCK & MENNIE UROLOGY CENTER OF SOUTH FLORIDA,P.A.

Current Principal Place of Business:

7400 SW 87 AVENUE
SUITE 240
MIAMI, FL 33173

Current Mailing Address:

7400 SW 87 AVENUE
SUITE 240
MIAMI, FL 33173 US

FEI Number: 59-1265799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: HARRY B. DAVIS, ASSISTANT VICE PRESIDENT 04/11/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D, VP, S, T	Title	D, P
Name	MADORSKY, MARTIN	Name	PINON, AVELINO
Address	7400 S.W. 87TH AVENUE SUITE 240	Address	7400 S.W. 87TH AVENUE SUITE 240
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33173
Title	D	Title	DIRECTOR
Name	BRUCK, DARREN	Name	MENNIE, PETER A
Address	7400 SW 87 AVENUE SUITE 240	Address	7400 SW 87 AVENUE SUITE 240
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33173

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: MARTIN MADORSKY DIRECTOR 04/11/2019

Electronic Signature of Signing Officer/Director Detail — Date