2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# 679900

Entity Name: SENDREI SURGICAL INSTRUMENT COMPANY, INC.

Current Principal Place of Business:

1473 VILLAGE GREEN DR.
UNIT B1
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

1473 VILLAGE GREEN DR.
UNIT B1
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 59-1899062 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SENDREI, LASLO
1473 VILLAGE GREEN DR.
UNIT B1
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

SENDREI LASLO
1473 VILLAGE GREEN DR.
UNIT B1
PORT ST. LUCIE, FL 34952 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: LASLO B. SENDREI 04/08/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: SENDREI, LASLO
Address: 1473 VILLAGE GREEN DR., UNIT B1
City-St-Zip: PT. ST. LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: SENDREI, LASLO B
Address: 1473 VILLAGE GREEN DR., UNIT B1
City-St-Zip: PT. ST. LUCIE, FL 34952

I hereby certify that the information supplied with this filing does not qualify 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: SENDREI LASLO PRES 04/08/2009
Electronic Signature of Signing Officer or Director Date