2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006738

Entity Name: SSI SURGICAL SERVICES, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
5776 HOFFNER AVENUE, SUITE #200 ORLANDO, FL 32822				
Current Mailing Address:			New Mailing Address:	
5776 HOFFNER AVENUE, SUITE #200 ORLANDO, FL 32822				
FEI Number: 11-2621408 FEI Number Applied For () FEI Number		nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:				
Electronic Signature of Registered Agent Date				
Election Campaign Financing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () D WHITTAKER, FOI 2345 WAUKEGAN BANNOCKBURN,	N ROAD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ABELLA, FRANK 21 OAK GROVE LANE EDISON, NJ 08820
Title: Name: Address: City-St-Zip:	TIHANKSY, CHRI	AVENUE, SUITE #200	Title: Name: Address: City-St-Zip:	P (X) Change () Addition TIHANKSY, CHRISTOPHER 5776 HOFFNER AVENUE, SUITE #200 ORLANDO, FL 32822
Title: Name: Address: City-St-Zip:	IRWIN, MIKE	velete AVENUE, SUITE #200 2822	Title: Name: Address: City-St-Zip:	SEC (X) Change () Addition D'ALESIO, PAUL 5776 HOFFNER AVENUE, SUITE #200 ORLANDO, FL 32822
Title: Name: Address: City-St-Zip:	D'ALESIO, PAUL	velete AVENUE, SUITE #200 2822	Title: Name: Address: City-St-Zip:	TREA (X) Change () Addition D'ALESIO, PAUL 5776 HOFFNER AVENUE, SUITE #200 ORLANDO, FL 32822
Title: Name: Address: City-St-Zip:	D'ALESIO, PAUL	elete AVENUE, SUITE #200 2822	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DEIGNAN, D. MICHAEL 33 CAT BRIER LANE HILTON HEAD, SC 29926
Title: Name: Address: City-St-Zip:	()[elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition DIMUN, ANTHONY 46 PARSONAGE HILL ROAD SHORT HILLS, NJ 07078

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: PAUL D'ALESIO SECR 04/20/2006