2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State
05-10-2004 90461 038 ***150.00

DOCUMENT # F98000002558

1. Entity Name
USCARDIOVASCULAR INCORPORATED

Principal Place of Business	Mailing Address
17101 PRESTON RD SUITE 245-5 DALLAS, TX 75248 US	17101 PRESTON RD SUITE 245-5 DALLAS, TX 75248 US

04282004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 41-1859035 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUCERI, RICHARD M 1971 EAST COMMERCIAL BLVD. STE 100 FT. LAUDERDALE, FL 33308	☒ Delete	Chairman Doug Olson, M.D. 6401 France Avenue South Minneapolis, MN 55435	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP COOLEY, STEVEN W 17101 PRESTON RD SUITE 2455 DALLAS, TX 75248	☒ Delete	Director James H. McGuire, III 7803 Glenroy Rd. Suite300 Bloomington, MN 55439	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GREEN, JOEL H 4200 IDS CENTER, 80 SOUTH 8TH ST. MINNEAPOLIS, MN 55402	☒ Delete	Director Dan Ericson 7803 Glenroy Rd. Suite300 Bloomington, MN 55439	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C EIBENSTEINER, RONALD E 800 NICOLLET MALL STE 2690 MINNEAPOLIS, MN 55402	☒ Delete	Director John Earney 1107 Hazeltine Blvd. Chaska, MN 55318	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEMP, JACK 1701 PENNSYLVANIA NW STE 900 WASHINGTON, DC 20006	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEMBROWICH, WALTER L 473 HAYWARD AVE. NORTH OAKDALE, MN 55128	☒ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4.28.04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #