

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L84057

Entity Name: SURGICORP, INC..

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

40347 US 19 NORTH
SUITE 121
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

744 SADDLEBROOK DRIVE
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

P.O. BOX 1968
TARPON SPRINGS, FL 346889871 US

New Mailing Address:

FEI Number: 59-3024599 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCREETON, MICHAEL J
40347 U.S. HWY 19 NO
SUITE 121
TARPON SPRINGS, FL 346894842 US

Name and Address of New Registered Agent:

SCREETON, MICHAEL J
744 SADDLEBROOK DRIVE
TARPON SPRINGS, FL 34689 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: MICHAEL J SCREETON

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PM () Delete
Name: SCREETON, MICHAEL J
Address: 3818 NICHOLAS CT
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SDC () Delete
Name: SCREETON, HELEN
Address: 3818 NICHOLAS CT
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PM (X) Change () Addition
Name: SCREETON, MICHAEL J
Address: 2316 SNOWY MOON COURT
City-St-Zip: HENDERSON, NV 89052 US

Title: SDC (X) Change () Addition
Name: SCREETON, HELEN
Address: 2316 SNOWY MOON COURT
City-St-Zip: HENDERSON, NV 89052 US

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: MICHAEL J SCREETON

PM

04/28/2006

Electronic Signature of Signing Officer or Director

Date