

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109764

Entity Name: E STREET ENDOSCOPY, INC.

FILED  
Jan 14, 2010  
Secretary of State

## Current Principal Place of Business:

616 E STREET  
A  
CLEARWATER, FL 33756

## New Principal Place of Business:

## Current Mailing Address:

616 E STREET  
A  
CLEARWATER, FL 33756

## New Mailing Address:

FEI Number: 59-3705426

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARBER, KIM  
616 E. STREET  
SUITE A  
CLEARWATER, FL 33756 US

## Name and Address of New Registered Agent:

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:

Title: D  
Name: BORISLOW M.D., DAVID  
Address: 474 HARBOR DRIVE S,  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: P  
Name: BECKER, DAVID MD  
Address: 225 13TH AVE SOUTH  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D  
Name: KLEIN, HOWARD M.D.  
Address: 5154 LOQUAT COURT  
City-St-Zip: PALM HARBOR, FL 34685

Title: D  
Name: JACOB, POTHEN M.D.  
Address: 630 SAXONY BLVD  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: VP  
Name: SREENATH, BELUR MD  
Address: 10092 WINDTREE BLVD  
City-St-Zip: SEMINOLE, FL 33772

Title: TR  
Name: CHOUDHRY, UMESH  
Address: 1773 LONG BOW LANE  
City-St-Zip: CLEARWATER, FL 33764

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: KIM BARBER

RA

01/14/2010

Electronic Signature of Signing Officer or Director

Date