

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000009764

Entity Name: SURGICAL TEAM, INC.

FILED
Nov 01, 2007
Secretary of State

Current Principal Place of Business:

260 CRANDON BLVD.
SUITE 32-178 PMB
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

260 CRANDON BLVD.
SUITE 32-178 PMB
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 65-1070461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAEGER, JONAS
1121 CRANDON BLVD APT E307
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

HAEGER, JONAS
1121 CRANDON BLVD APT E603
KEY BISCAYNE, FL 33149 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: JONAS HAEGER

11/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HAEGER, JONAS
Address: 1121CRANDON BLVD APT E307
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: HAEGER, JONAS
Address: 1121CRANDON BLVD APT E603
City-St-Zip: KEY BISCAYNE, FL 33149

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: JONAS HAEGER

PST

11/01/2007

Electronic Signature of Signing Officer or Director

Date