

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000120494

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** UROLOGICAL TECHNOLOGIES, CORPORATION

**Current Principal Place of Business:**

9450 SUNSET DRIVE  
MIAMI, FL 33173

**New Principal Place of Business:**

1651 SOUTH LEJUENE ROAD  
MIAMI, FL 33134

**Current Mailing Address:**

P.O. BOX 430885  
MIAMI, FL 33155

**New Mailing Address:**

1651 SOUTH LEJUENE ROAD  
MIAMI, FL 33134

**FEI Number:** 22-3882168

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DE SOCARRAZ, MARIANO  
9450 SUNSET DRIVE  
MIAMI, FL 33173 US

**Name and Address of New Registered Agent:**

DE SOCARRAZ, MARIANO  
1651 SOUTH LEJUENE ROAD  
MIAMI, FL 33134 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: MARIANO DE SOCARRAZ

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DE SOCARRAZ, MARIANO  
Address: 1651 SOUTH LEJUENE ROAD  
City-St-Zip: MIAMI, FL 33134

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: MARIANO DE SOCARRAZ

P

04/09/2012

Electronic Signature of Signing Officer or Director

Date