2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# P03000017033

Entity Name: PARAMOUNT SPORTS MEDICINE, INC.

Current Principal Place of Business:

6601 W. HWY.329
REDDICK, FL 32686

New Principal Place of Business:

14433 ROLLING ROCK PLACE
WELLINGTON, FL 33414

Current Mailing Address:

P.O. BOX 211718
ROYAL PALM BEACH, FL 211718 US

New Mailing Address:

FEI Number: 02-0674877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REY, ALEJANDRO MD
6607 W. HWY.329
REDDICK, FL 32686 US

Name and Address of New Registered Agent:

REY, ALEJANDRO MD
14433 ROLLING ROCK PLACE
WELLINGTON, FL 33414 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: 01/19/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ROSS, ANNEMARIE
Address: 6607 W. HWY.329
City-St-Zip: REDDICK, FL 32686

Title: V ( ) Delete
Name: REY, ALEJANDRO
Address: 6607 W. HWY.329
City-St-Zip: REDDICK, FL 32686

Title: VST (X) Delete
Name: LORENTE, ROSAMARIA
Address: 6607 W. HWY.329
City-St-Zip: REDDICK, FL 32686

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: REY, ALEJANDRO
Address: 14433 ROLLING ROCK PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: V (X) Change ( ) Addition
Name: LORENTE, ROSAMARIA
Address: 14433 ROLLING ROCK PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROSAMARIA LORENTE VP 01/19/2009
Electronic Signature of Signing Officer or Director — Date