2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2012
Secretary of State

DOCUMENT# P04000114112

Entity Name: CENTER FOR ADVANCED REPRODUCTIVE MEDICINE-SURGERY, P.A.

Current Principal Place of Business:

9530 BONITA BEACH ROAD
104
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

9530 BONITA BEACH ROAD
104
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 90-0191415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KORN, TYLER B ESQ
5811 PELICAN BAY BLVD.
SUITE 209
NAPLES, FL 34108 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

OFFICERS AND DIRECTORS:

Title: P
Name: JORGE, VALLE M.D.
Address: 9530 BONITA BEACH ROAD SUITE 104
City-St-Zip: BONITA SPRINGS, FL 34135

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: MARTHA L VALLE OM 03/09/2012

Electronic Signature of Signing Officer or Director — Date