

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056846

FILED  
Apr 01, 2010  
Secretary of State

**Entity Name:** ENDOSCOPY PROFESSIONAL SERVICES, INC.

**Current Principal Place of Business:**

1200 N. CENTRAL AVE.  
102  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

1080 CYPRESS PARKWAY  
213  
KISSIMMEE, FL 34759

**Current Mailing Address:**

1200 N. CENTRAL AVE.  
102  
KISSIMMEE, FL 34741

**New Mailing Address:**

1080 CYPRESS PARKWAY  
PMB 213  
KISSIMMEE, FL 34759

**FEI Number:** 20-2764162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PEREZ, ZOSIE  
2671 LOOKOUT LANE  
KISSIMMEE, FL 34746 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: PRES  
Name: PEREZ, ZOSIE B PRESIDE  
Address: 2671 LOOKOUT LANE  
City-St-Zip: KISSIMMEE, FL 34746

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:** ZOSIE PEREZ

PRES

04/01/2010

Electronic Signature of Signing Officer or Director

Date