2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164048

Entity Name: SURGICAL MEDICAL MANAGEMENT, INC.

FILED Jan 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1150 N. 35TH AVENUE 100 SE 15TH AVE

SUITE 490 FORT LAUDERDALE, FL 33301 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

1150 N. 35TH AVENUE 100 SE 15TH AVE

SUITE 490 FORT LAUDERDALE, FL 33301 HOLLYWOOD, FL 33021

FEI Number: 20-3949752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MORRIS, STUART R ESQ. 7000 WEST PALMETTO PARK ROAD SUITE 310 BOCA RATON, FL 33433 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 STELNICKI, ERIC J
 Name:
 STELNICKI, ERIC J

 Address:
 1150 N. 35TH AVENUE, SUITE 490
 Address:
 100 SE 15TH AVE

City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: FORT LAUDERDALE, FL 33301

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: ERIC STELNICKI MD CEO 01/17/2009