

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164048

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

**Entity Name:** SURGICAL MEDICAL MANAGEMENT, INC.

**Current Principal Place of Business:**

100 SE 15TH AVE  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

100 SE 15TH AVE  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 20-3949752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRIS LAW GROUP  
7000 WEST PALMETTO PARK ROAD  
SUITE 205  
BOCA RATON, FL 33433 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: PD  
Name: STELNICKI, ERIC J  
Address: 100 SE 15TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33301

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: ERIC STELNICKI

CEO

02/09/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date