2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2010
Secretary of State

DOCUMENT# P07000067943

Entity Name: ENGELT MEDICAL SYSTEMS, INC.

Current Principal Place of Business:

717 PONCE DE LEON BLVD
STE 330
CORAL GABLES, FL 33134

New Principal Place of Business:

1451 WEST CYPRESS CREEK RD
STE 300
FORT LAUDERDALE, FL 33309

Current Mailing Address:

717 PONCE DE LEON BLVD
STE 330
CORAL GABLES, FL 33134

New Mailing Address:

1451 WEST CYPRESS CREEK RD
STE 300
FORT LAUDERDALE, FL 33309

FEI Number: 42-1732737 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

EVANS, LAWRENCE S ESQ
717 PONCE DE LEON BLVD
STE 330
CORAL GABLES, FL 33134 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: D
Name: COSTA, EDSON MR
Address: 21W 46ST STE 1502 SOUTH
City-St-Zip: NEW YORK CITY, NY 10036 US

Title: S
Name: SOBRINHO, ANA BEATRIZ V MRS
Address: 21W 46TH ST SUITE 1502 SOUTH
City-St-Zip: NEW YORK CITY, NY 10036 US

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: EDSON COSTA D 05/21/2010

Electronic Signature of Signing Officer or Director — Date