2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# P07000072810

Entity Name: ADVANCED ENDOSCOPY SOLUTIONS INC.

Current Principal Place of Business:

5889 S. WILLIAMSON BLVD., STE. 1425
PORT ORANGE, FL 32128

New Principal Place of Business:

1901 MASON AVE. SUITE 104
DAYTONA BEACH, FL 32117

Current Mailing Address:

5889 S. WILLIAMSON BLVD., STE. 1425
PORT ORANGE, FL 32128

New Mailing Address:

1901 MASON AVE. SUITE 104
DAYTONA BEACH, FL 32117

FEI Number: 26-0399311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: PD ( ) Delete
Name: MASON, BRUCE
Address: 348 PERFECT DR
City-St-Zip: DAYTONA BEACH, FL 32124

Title: VPD ( ) Delete
Name: MASON, REGINA
Address: 348 PERFECT DR
City-St-Zip: DAYTONA BEACH, FL 32124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: BRUCE ALLEN MASON PD 03/27/2009

Electronic Signature of Signing Officer or Director — Date