

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000099545

FILED
Mar 24, 2009
Secretary of State

Entity Name: COAST TO COAST HOSPITAL SURGEONS, INC.

Current Principal Place of Business:

61 BRONX RIVER ROAD
#7B
YONKERS, NY 10704

New Principal Place of Business:

705 BRONX RIVER ROAD
SUITE 200
YONKERS, NY 10704

Current Mailing Address:

61 BRONX RIVER ROAD
#7B
YONKERS, NY 10704

New Mailing Address:

976 MCLEAN AVE.
SUITE 976
YONKERS, NY 10704

FEI Number: 26-0847860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THEODOROU, JOHN
19380 COLLINS AVENUE
1122B
SUNNY ISLES BEACH, FL 33160 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: P () Delete
Name: THEODOROU, SPERO
Address: 61 BRONX RIVER ROAD - 7B
City-St-Zip: YONKERS, NY 10704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THEODOROU, SPERO
Address: 420 E.61ST ST #26B
City-St-Zip: NEW YORK, NY 10065

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: SPERO THEODOROU

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date