2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P07000133548

Entity Name: ADVANCED SURGICAL ASSISTANTS, INC

Current Principal Place of Business:

1865 N. CORPORATE LAKE BLVD.
WESTON, FL 33326

New Principal Place of Business:

307 EVERNIA STREET
SUITE 200
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

1865 N. CORPORATE LAKE BLVD.
WESTON, FL 33326

New Mailing Address:

307 EVERNIA STREET
SUITE 200
WEST PALM BEACH, FL 33401 US

FEI Number: 26-1608359 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AYALA, LUIS
1865 N. CORPORATE LAKE BLVD.
WESTON, FL 33326 US

Name and Address of New Registered Agent:

PINZON, JUAN C
307 EVERNIA STREET
SUITE 200
WEST PALM BEACH, FL 33401 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: JUAN C PINZON 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: AYALA, LUIS
Address: 3728 VISTA WAY
City-St-Zip: WESTON, FL 33331

Title: DS (X) Delete
Name: PINZON, JUAN C.
Address: 10330 FOXTRAIL RD. S., #1214
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: PINZON, JUAN C
Address: 307 EVERNIA STREET SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33401 US

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: JUAN C PINZON PSD 04/24/2009
Electronic Signature of Signing Officer or Director Date