2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# P09000020677

Entity Name: MEDICAL ARTS TRAINING SYSTEMS INC

Current Principal Place of Business:

3580 ULMERTON ROAD
202
CLEARWATER, FL 33762 US

New Principal Place of Business:

5864 5TH AVENUE, NORTH
ST. PETERSBURG, FL 33710 US

Current Mailing Address:

PO BOX 1115
SAINT PETERSBURG, FL 33731 US

New Mailing Address:

FEI Number: 80-0361272 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASBLE, ALEX W
3580 ULMERTON ROAD
202
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

ASBLE, ALEX W
5864 5TH AVENUE, NORTH
ST. PETERSBURG, FL 33710 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: 04/29/2011

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D,P
Name: ASBLE, ALEX W
Address: 5864 5TH AVENUE, NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: S, T
Name: CLARK, DENNIS
Address: 5864 5TH AVENUE, NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 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: ALEX W. ASBLE D, P 04/29/2011

Electronic Signature of Signing Officer or Director — Date