2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2012
Secretary of State

DOCUMENT# P09000097219

Entity Name: ALPHA BIOSURGERY INC

Current Principal Place of Business:

4605 NW 6TH STREET
SUITE A
GAINESVILLE, FL 32609

New Principal Place of Business:

470 TURKEY CREEK
ALACHUA, FL 32615

Current Mailing Address:

4605 NW 6TH STREET
SUITE A
GAINESVILLE, FL 32609

New Mailing Address:

470 TURKEY CREEK
ALACHUA, FL 32615

FEI Number: 27-1445331 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCQUEEN, ADAM D
470 TURKEY CREEK
ALACHUA, FL 32615 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

OFFICERS AND DIRECTORS:

Title: P
Name: MCQUEEN, ADAM D
Address: 7403 NW 117TH LANE
City-St-Zip: ALACHUA, FL 32615

Title: VP
Name: BOSSARD, MARK
Address: 4605 NW 6TH STREET, SUITE A
City-St-Zip: GAINESVILLE, FL 32609

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: ADAM D. MCQUEEN P 03/15/2012

Electronic Signature of Signing Officer or Director — Date