2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2011
Secretary of State

DOCUMENT# P10000095311

Entity Name: RAPHA VASCULAR SPECIALISTS, INC.

Current Principal Place of Business:

4748 HIGHLANDS PLACE DRIVE
LAKELAND, FL 33813

New Principal Place of Business:

1619 HARDEN BOULEVARD
LAKELAND, FL 33803 US

Current Mailing Address:

4748 HIGHLANDS PLACE DRIVE
LAKELAND, FL 33813

New Mailing Address:

1619 HARDEN BOULEVARD
LAKELAND, FL 33803 US

FEI Number: 27-4006938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NWOBI, OBINNA
4748 HIGHLANDS PLACE DRIVE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

NWOBI, OBINNA
1619 HARDEN BOULEVARD
LAKELAND, FL 33803 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: 04/27/2011

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: NWOBI, OBINNA
Address: 1619 HARDEN BOULEVARD
City-St-Zip: LAKELAND, FL 33803 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: OBINNA NWOBI, MD P 04/27/2011

Electronic Signature of Signing Officer or Director — Date