2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2011
Secretary of State

DOCUMENT# P94000010937

Entity Name: DELRAY OUTPATIENT SURGERY AND LASER CENTER, INC.

Current Principal Place of Business:

4800 LINTON BOULEVARD
BUILDING B
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

4800 LINTON BOULEVARD
BUILDING B
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 65-0457828 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MELLMAN, ROBERT
4800 LINTON BLVD
BLDG B
DELRAY BEACH, FL 33445 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: MELLMAN, ROBERT DR
Address: 1000 NW 9TH COURT, STE 204
City-St-Zip: BOCA RATON, FL 33486

Title: VPST
Name: MEADOWS, STEVE
Address: 4800 LINTON BLVD., BLDG. A
City-St-Zip: DELRAY BEACH, FL 33445

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: ROBERT MELLMAN P 03/17/2011

Electronic Signature of Signing Officer or Director — Date