2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

DOCUMENT# P96000004231

Entity Name: EMERGENCY PHYSICIAN ENTERPRISES, INC.

Current Principal Place of Business:

1800 FOREST HILL BOULEVARD
SUITE A2
WEST PALM BEACH, FL 33406

New Principal Place of Business:

2290 SEVEN OAKS LANE
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

1800 FOREST HILL BOULEVARD
SUITE A2
WEST PALM BEACH, FL 33406

New Mailing Address:

P.O. BOX 811992
BOCA RATON, FL 33481

FEI Number: 65-0646737 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZAPPA, MICHAEL J
2290 SEVEN OAKS LANE
PALM BEACH GARDENS, FL 33410 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: PVST
Name: ZAPPA, MICHAEL J
Address: 2290 SEVEN OAKS LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D
Name: ZAPPA, MICHAEL J
Address: 2290 SEVEN OAKS LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VD
Name: ZAPPA, JOANN M
Address: 44 GOLD PLACE
City-St-Zip: MALVERNE, NY 11565

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: MICHAEL J. ZAPPA, MD PRES 04/04/2011

Electronic Signature of Signing Officer or Director — Date