2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006
Secretary of State

DOCUMENT# P96000092948

Entity Name: MVP CARDIOVASCULAR SERVICES, INC.

Current Principal Place of Business:

7171 SW 62ND AVE. STE 301
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7171 SW 62ND AVE
SUITE 101
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0716181 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, MICHAEL B ESQ.
900 SUNTRUST BLDG. 777 BRIKCELL AVE
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MAS, IDELFONSO JR.
Address: 7360 SW 164TH ST.
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete
Name: VILLACIAN, FERNANDO MD
Address: 8600 RIVIERA DRIVE
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: PALOMO, ANDRES M.D.
Address: 12095 SW 62ND AVE.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FERNANDO VILLACIAN MD 04/11/2006

Electronic Signature of Signing Officer or Director — Date