2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2012
Secretary of State

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Entity Name: CURE SOUTHEAST MEDICAL SERVICES, INC.

Current Principal Place of Business:

1006 S.E. 9TH STREET
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

PO BOX 1219
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 65-0831047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SNURR, KENNETH S
1395 S. OCEAN BLVD.
703
FT. LAUDERDALE, FL 33062 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: D
Name: SNURR, KENNETH S PRES.
Address: 1395 S. OCEAN BLVD. SUITE #703
City-St-Zip: FT. LAUDERDALE, FL 33062

Title: V.P.
Name: MARTIN, ROBERT V.P.
Address: 1702 S. W. 11TH AVE
City-St-Zip: CAPE CORAL, FL 33991 US

Title: TREA
Name: CHAHANOVICH, ROBIN T TREAS
Address: 11741 NEWBERRY GROVE LOOP
City-St-Zip: RIVERVIEW, FL 33579 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: KENNETH S. SNURR CEO 08/28/2012

Electronic Signature of Signing Officer or Director — Date