

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010393

FILED
Jan 16, 2006
Secretary of State

Entity Name: AVENTURA SURGICAL GROUP, INC.

Current Principal Place of Business:

21110 BISCAYNE BLVD, STE 400
AVENTURA, FL 33180

New Principal Place of Business:

21110 BISCAYNE BLVD.
SUITE 400
AVENTURA, FL 33180

Current Mailing Address:

21110 BISCAYNE BLVD, STE 400
AVENTURA, FL 33180

New Mailing Address:

21110 BISCAYNE BLVD.
SUITE 400
AVENTURA, FL 33180

FEI Number: 65-0890534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIENER, EDWARD L
21110 BISCAYNE BLVD, STE 400
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

WIENER, EDWARD L
21110 BISCAYNE BLVD
SUITE 400
AVENTURA, FL 33180 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:

01/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WIENER, EDWARD L
Address: 622 GOLDEN BEACH DR
City-St-Zip: GOLDEN, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: WIENER, EDWARD L
Address: 622 GOLDEN BEACH DR
City-St-Zip: GOLDEN BEACH, FL 33160

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: EDWARD L. WIENER

DR.

01/16/2006

Electronic Signature of Signing Officer or Director

Date