

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058239

FILED
Jan 31, 2004
Secretary of State

Entity Name: SURGICAL VISIONS INTERNATIONAL, INC.

Current Principal Place of Business:

4201 WESTGATE AVE
B-2
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

4521 PGA BOULEVARD
PMB 272
PALM BEACH GARDENS, FL 33418

New Mailing Address:

4201 WESTGATE AVE
B-2
WEST PALM BEACH, FL 33409

FEI Number: 65-0930351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOVOU, MARIA
4521 PGA BOULEVARD
PMB 272
PALM BEACH GARDENS, FL 33418

Name and Address of New Registered Agent:

VOVOU, MARIA
4201 WESTGATE AVE
B-2
WEST PALM BEACH, FL 33409

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:

01/31/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOVOU, MARIA
Address: 4201 WEST GATE AVE. STE B-2
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: MARIA VOVOU

D

01/31/2004

Electronic Signature of Signing Officer or Director

Date