2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# S54977

Entity Name: SURGICAL ASSISTANT SERVICES, INC.

Current Principal Place of Business:

P O BOX 450381
SUNRISE, FL 33345

New Principal Place of Business:

2700 GLADES CIRCLE
SUITE #107
WESTON, FL 33327

Current Mailing Address:

P.O. BOX 450381
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 65-0272595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRESNIHAN, WILLIAM T JR.
2700 GLADES CIR STE #107
WESTON, FL 33327 US

Name and Address of New Registered Agent:

BRESNIHAN, WILLIAM T JR.
2700 GLADES CIRCLE
SUITE #107
WESTON, FL 33327 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: _____ 07/05/2007
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: BRESNIHAN, WILLIAM T JR.
Address: 2700 GLADE CIR STE #107
City-St-Zip: FORT LAUDERDALE, FL 33327

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 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: WILLIAM T BRESNIHAN JR P 07/05/2007
Electronic Signature of Signing Officer or Director — Date