

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060738

Entity Name: VASCULAR AND SPINE INSTITUTE, INC.

Current Principal Place of Business:

9175 SW 87TH AVENUE
MIAMI, FL 33176

Current Mailing Address:

9175 SW 87TH AVENUE
MIAMI, FL 33176 US

FEI Number: 20-2755719

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAYTON, PETER
9100 S DADELAND BLVD
SUITE 1505
MIAMI, FL 33156 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name TIE-SHUE, GARY
Address 9175 SW 87TH AVENUE
City-State-Zip: MIAMI FL 33176

Title D
Name SOSA, OSCAR M.D.
Address 9175 SW 87TH AVENUE
City-State-Zip: MIAMI FL 33176

Title DIRECTOR
Name CLAYTON, PETER A
Address 9175 SW 87TH AVENUE
City-State-Zip: MIAMI FL 33176

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: PETER CLAYTON

DIRECTOR

04/14/2025

Electronic Signature of Signing Officer/Director Detail

Date