2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2015
Secretary of State
CC8317203323

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Entity Name: PALM BEACH VASCULAR INSTITUTE, INC.

Current Principal Place of Business:

2815 S. SEACREST BOULEVARD
BOYNTON BEACH, FL 33435

Current Mailing Address:

2815 S. SEACREST BOULEVARD
BOYNTON BEACH, FL 33435 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RITSON, GARY
2815 S. SEACREST BOULEVARD
BOYNTON BEACH, FL 33435 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	P/CEO	Title	VP/S
Name	KIRK, ROGER	Name	BROADWAY, ROBERT
Address	2815 S. SEACREST BOULEVARD	Address	2815 S. SEACREST BOULEVARD
City-State-Zip:	BOYNTON BEACH FL 33435	City-State-Zip:	BOYNTON BEACH FL 33435

Title	VP/CFO
Name	AQUILINA, JOANNE
Address	2815 S. SEACREST BOULEVARD
City-State-Zip:	BOYNTON BEACH FL 33435

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: ROGER KIRK PRESIDENT 06/18/2015

Electronic Signature of Signing Officer/Director Detail — Date