

2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000001346

FILED
Apr 29, 2004
Secretary of State

Entity Name: BAY AREA ENDOSCOPY AND SURGERY CENTER LIMITED PARTNERSHIP

Current Principal Place of Business:

5771 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

5771 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 59-3213374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARA, ADALYS CPA
3711 TAMPA ROAD
SUITE 103
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

DEL RIO, J. EDWARD CPA
888 EXECUTIVE CENTER DRIVE WEST
SUITE 101
ST. PETERSBURG, FL 33702 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: J. EDWARD DEL RIO

04/29/2004

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 4,900.00

Amount of Capital Contributions in Florida to date: 4,900.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #:

Name: BAY AREA ENDOSCOPY ASSOCIATES, INC.

Address: 5771 49TH STREET NORTH

City-St-Zip: ST. PETERSBURG, FL 33709

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JAYAPRAKASH KAMATH

DR.

04/29/2004

Electronic Signature of Signing General Partner

Date