

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 19, 2007
Secretary of State**

DOCUMENT# L06000034904

Entity Name: SARASOTA SURGERY CENTER, LLC

Current Principal Place of Business:

C/O J.A. ZISKIND, ESQ.
3059 GRAND AVENUE, SUITE 300
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

C/O J.A. ZISKIND, ESQ.
3059 GRAND AVENUE, SUITE 300
MIAMI, FL 33133

New Mailing Address:

FEI Number: 43-2110985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ZISKING, J A ESQ.
Address: 3059 GRAND AVENUE, SUITE 300
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

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 Chapter 119, 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: J.A. ZISKIND MGR 01/19/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date