

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M19530

FILED
Jan 05, 2011
Secretary of State

Entity Name: PEDIATRIC CRITICAL CARE OF SOUTH FLORIDA, P.A.

Current Principal Place of Business:

157 DOCKSIDE CIRCLE
WESTON, FL 33327

New Principal Place of Business:

1117 EAST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

Current Mailing Address:

157 DOCKSIDE CIRCLE
WESTON, FL 33327

New Mailing Address:

1117 EAST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009

FEI Number: 59-2567276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREISSMAN, ALLAN
157 DOCKSIDE CIRCLE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

GREISSMAN, ALLAN
1117 EAST HALLANDALE BEACH BLVD
HALLANDALE, FL 33009 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: ALLAN GREISSMAN

01/05/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GREISSMAN, ALLAN
Address: 157 DOCKSIDE CIRCLE
City-St-Zip: WESTON, FL 33327

Title: ST
Name: LAVANDOSKY, GERALD
Address: 3501 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: ALLAN GREISSMAN

PRES

01/05/2011

Electronic Signature of Signing Officer or Director

Date