FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
05-21-2002 91151 031 ***150.00

DOCUMENT # P01000021588

1. Entity Name: Northwest Florida Heart Group, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8333 N. Davis Highway	8333 N. Davis Highway
Suite, Apt. #, etc.: 4th Floor	Suite, Apt. #, etc.: 4th Floor
City & State: Pensacola, Florida	City & State: Pensacola, Florida
Zip: 32514 Country: USA	Zip: 32514 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3710198 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: David Miles, MD
Street Address (P.O. Box Number is Not Acceptable): 8333 N. Davis Highway 4th Floor
City: Pensacola FL Zip Code: 32514

8. 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: [signature] 4/30/02
Signature, typed or printed name of registered agent, and title if applicable. *NOTE: Registered Agent signature required when reinstating. DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	Director
NAME	David Miles, MD
STREET ADDRESS	8333 N. Davis Highway 4th FLOOR
CITY-ST-ZIP	Pensacola, FL. 32514
TITLE	D
NAME	MARCELO C BRANCO
STREET ADDRESS	8333 N. DAVIS HWY 4TH FLOOR
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	D
NAME	JOSE GUITAN
STREET ADDRESS	8333 N DAVIS HWY 4TH FLOOR
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	D
NAME	DANIEL PHILLIPS
STREET ADDRESS	8333 N DAVIS HWY 4TH FLOOR
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	D
NAME	PAUL TAMBURRO
STREET ADDRESS	8333 N. DAVIS HWY 4TH FLOOR
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	
NAME	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/30/02 (850) 474-8402
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #