2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000012574

1. Entity Name

COPPAGE ANESTHESIA SERVICES, INC. (Name Changed To:)
MARCOS ENTERPRISE OF SOUTH FLORIDA, INCORPORATED

FILED
01 MAY -1 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
17756 38TH LANE NORTH LOXAHATCHEE FL 33470	17756 38TH LANE NORTH LOXAHATCHEE FL 33470

04/13/01-90016-038 $150.00

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0741197 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COPPAGE, MARLOWE 17756 38TH LANE NORTH LOXAHATCHEE FL 33470	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

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. Name Changed.

SIGNATURE X [signature] April 9, 2001

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Marlowe H. Coppage, President & CEO

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

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT COPPAGE, MARLOWE 17756 38TH LANE NORTH LOXAHATCHEE FL 33470	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS COPPAGE, W/MARGOT M 17756 38TH LANE NORTH LOXAHATCHEE FL 33470	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS COPPAGE, Margot M. (Delete: "W/") 17756 38th Lane North Loxahatchee, FL 33470	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] April 9, 2001 561 793-9832

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Marlowe H. Coppage, President & CEO