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Jan 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S62193 (5)
1. Corporation Name
BAYFRONT ANESTHESIA SERVICES, P.A.



Principal Place of Business: 3637 4TH ST. NORTH SUITE 400 ST PETERSBURG FL 33704 US
Mailing Address: 3637 4TH ST. NORTH SUITE 400 ST PETERSBURG FL 33704-1337 US

3. Date Incorporated or Qualified: 06/24/1991
3a. Date of Last Report: 03/14/1996
4. FEI Number: 59-3072468
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-fields for Suite, Apt. #, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: MARDER, JEFFREY, 3637 4TH STREET NORTH #400, ST PETERSBURG FL 33704

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code (FL).

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	ALMENGUAL, ALAN	746 18TH AVENUE N.E.	ST PETERSBURG FL
TITLE	D	MARDER, JEFFREY	300 8TH AVE NE	ST PETERSBURG FL
TITLE	D	SABADISH, JOSEPH	1989 72ND AVE NE	ST PETERSBURG FL
TITLE	D	SHAH, KOKILA	7469 18TH ST NE	ST PETERSBURG FL
TITLE	D	SCHAFFER, ROBIN	2052 CAROLINA AVE NE	ST PETERSBURG FL
TITLE	P	LUDNER, CONFIDENT	1416 - 72ND AVE., N.E.	ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	BILL EVANS	390 4th Street	Avenue N	Tierra Verde FL 33715
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: 1-10-97 DAYTIME PHONE #: 813-823-2188

CR2E034 (9/96)