

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069743

Entity Name: ANESTHESIA BEACH DEVELOPMENT, INC.

Current Principal Place of Business:

12890 NE STATE RD 24
ARCHER, FL 32618

Current Mailing Address:

12890 NE STATE RD 24
ARCHER , FL 32618 US

FEI Number: 20-2831758

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATSON , LARRY R.
12890 NE STATE RD 24
ARCHER, FL 32618 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: LARRY WATSON

04/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WATSON, LARRY R
Address 12890 NE STATE RD 24
City-State-Zip: ARCHER FL 32618

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: LARRY WATSON

PRESIDENT

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date