

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000093668

**Entity Name:** ORLANDO DAY SURGERY, INC

**Current Principal Place of Business:**

1056 E OSCEOLA PKWY  
KISSIMMEE, FL 34744

**Current Mailing Address:**

PO BOX 620811  
ORLANDO, FL 32862 UN

**FEI Number: 85-4341051**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SABHARWAL, SARAT  
1056 E. OSCEOLA PKWY  
KISSIMMEE, FL 34744 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	SABHARWAL, SARAT	Name	SABHARWAL, ANITA
Address	1056 E. OSCEOLA PKWY	Address	1056 E. OSCEOLA PKWY
City-State-Zip:	KISSIMMEE FL 34744	City-State-Zip:	KISSIMMEE FL 34744

*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: SARAT SABHARWAL**

**AMBR**

**04/17/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date