

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007574

Entity Name: OMNI MEDICAL CENTER FOR WOMEN, P.L.C.

Current Principal Place of Business:

706 WEST PLATT STREET
TAMPA, FL 33606

Current Mailing Address:

706 WEST PLATT STREET
TAMPA, FL 33606

FEI Number: 59-3606752

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAKHARY, ATEF S
706 WEST PLAT STREET
TAMPA, FL 33606 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

Authorized Person(s) Detail :

Title PRES
Name ZAKHARY, ATEF S
Address 706 WEST PLATT ST.
City-State-Zip: TAMPA FL 33606

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ATEF ZAKHARY

PRESIDENT

01/18/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date