

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000003552

Entity Name: ADVANTAGE ANESTHESIA, LLC

Current Principal Place of Business:

327 WAHOO ROAD
PANAMA CITY BEACH, FL 32411

Current Mailing Address:

P.O. BOX 27357
PANAMA CITY BEACH, FL 32411

FEI Number: 20-4348656

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASEK, MARTIN
327 WAHOO RD
PANAMA CITY BEACH, FL 32411 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 MGR
Name NITRAM MANAGEMENT, LLC
Address 327 WAHOO ROAD
City-State-Zip: PANAMA CITY BEACH FL 32411

Title P
Name HASEK, MARTIN PRES.
Address 202 DOCTORS DRIVE
City-State-Zip: PANANMA CITY FL 32411

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: O. MARTIN HASEK III

MGR

04/04/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date