

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90374 012 ***150.00

DOCUMENT # 601985

1. Entity Name

~~FRED SWING KANG AND ASSOCIATES, P.A.~~

FLORIDA ANESTHESIA PROFESSIONALS, P.A.

Principal Place of Business

2811 TAMiami TRAIL

P

PORT CHARLOTTE FL 33952

Mailing Address

2811 TAMiami TRAIL

P

PORT CHARLOTTE FL 33952

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-0946430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWING, FRED P

24010 HARBOR VIEW ROAD

CHARLOTTE HARBOR FL

Name

Han Shin M.D.

Street Address (P.O. Box Number is Not Acceptable)

2811 Tamiami Trail Suite P

Port Charlotte

City

Port Charlotte

FL

Zip Code
33952

8. 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

[Signature]
Signature typed or printed name of registered agent and title if applicable.

Han Shin President/Director

01/09/02

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
SWING, FRED P
24010 HARBOR VIEW ROAD
CHARLOTTE HARBOR FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
Han Shin
2811 Tamiami Trail Suite P
Port Charlotte, Florida 33952 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
SHIN, HAN S
2811 TAMiami TRAIL STE P
PORT CHARLOTTE FL 33952 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Calvin K. Kim
2811 Tamiami Trail Suite P
Port Charlotte, Florida 33952 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Delete ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST.
Mark A. Addonizio
2811 Tamiami Trail Suite P
Port Charlotte, Florida 33952 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Delete ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Change ☐ Addition ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Delete ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Change ☐ Addition ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Delete ---

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
--- ☐ Change ☐ Addition ---

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Han Shin

01/09/02 941-629-7337

Date

Daytime Phone #

CR2E034 (9/01)

Attachment

Florida Anesthesia Professionals, P.A.

*Board Certified

Han Soon Shin, MD, DABA*
Calvin K. Kim, MD, DABA*
Mark A. Addonizio, MD, DABA*
William B. Caldwell, DO, AOBA*

601985

808638

January 9, 2002

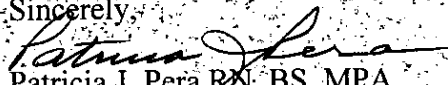
Florida Department of State
Division of Corporations
UBR
PO Box 1500
Tallahassee, Florida 32302-1500

Please note the changes made on the enclosed Uniform Business Report. We have changed the name and the officers of the corporation.

If you have any questions please call me at 941-629-7337.

Thank you.

Sincerely,


Patricia J. Pera RN, BS, MPA
Practice Manager