## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A29512

FILED Apr 26, 2007 Secretary of State

Entity Name: TAMPA OUTPATIENT SURGERY JOINT VENTURE, LTD.

Current Principal Place of Business: New Principal Place of Business:

5013 N. ARMENIA AVE. 3816 W. LINEBAUGH AVE., STE. 300

TAMPA, FL 33603 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

5013 N. ARMENIA AVE. 3816 W. LINEBAUGH AVE. STE. 300

TAMPA, FL 33603 TAMPA, FL 33618

FEI Number: 62-1398632 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MEZRAH, JACK MD SAPHIER, ALBERT MD 5013 N ARMENIA AVE 3816 W. LINEBAUGH AVE., STE. 300

TAMPA, FL 33603 US TAMPA, FL 33618 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: ALBERT SAPHIER MD 04/26/2007

Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: J92365

Name: TAMPA OUTPATIENT SURGICAL FACILITY, INC.

Address: 5013 N. ARMENIA AVE. Address: 3816 W. LINEBAUGH AVE., STE. 300

City-St-Zip: TAMPA, FL 33603 US City-St-Zip: TAMPA, FL 33618 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: ALBERT SAPHIER MD 04/26/2007