


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # F95000002059
 1. Entity Name
AMSURG MIAMI, INC.



Principal Place of Business 20 BURTON HILLS BLVD 5TH FLOOR NASHVILLE, TN 37215 US	Mailing Address 20 BURTON HILLS BLVD 5TH FLOOR NASHVILLE, TN 37215 US
--	--

DO NOT WRITE IN THIS SPACE



04262004 No Chg-P CR2E034 (10/03)

4. FEI Number 62-1598504	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	WINKER, CYNTHIA A.
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215
TITLE	PD
NAME	MCDONALD, KEN
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215
TITLE	STD
NAME	GULMI, CLAIRE M
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215
TITLE	V
NAME	HARRELL, ROYCE D
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215
TITLE	V
NAME	MANNING, DAVID L
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215
TITLE	VDS
NAME	ZAMOJSKI, DENNIS J
STREET ADDRESS	20 BURTON HILLS BLVD, 5TH FLOOR
CITY-ST-ZIP	NASHVILLE, TN 37215

DO NOT WRITE IN THIS SPACE

00000155951
 05/05/04-80057-025 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Claire M. Gulmi Claire M. Gulmi 4/26/04 615-665-1283

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #