2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J80841

Entity Name: SURGICAL PARK ANESTHESIA GROUP, P.A.

FILED Jan 18, 2002 8:00 AM Secretary of State

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

9100 S.W. 87TH AVE. MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

% RODNEY L. TEICHNER, M.D. GERALD KRANIS MD 8821 SW 102 ST 12245 SW 101 TERRACE MIAMI, FL 33176 MIAMI, FL 33186

FEI Number: 65-0016817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TEICHNER, RODNEY L., M.D. KRANIS, GERALD MD 8821 SW 102 ST 12245 SW 101 TERRACE MIAMI, FL 33176 US MIAMI, FL 33186

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: GERALD KRANIS 01/18/2002

> Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete PSD Title: **PSD** (X) Change () Addition TEICHNER, RODNEY L., KRANIS, GERALD, Name: Name: 8821 SW 102 ST 12245 SW 101 TERRACE Address: Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33186

Title: Title: (X) Change () Addition () Delete CONNOR, SETH Name: KRANIS, GERALD Name:

9100 SW 87TH AVE 9100 SW 87TH AVE Address: Address: MIAMI, FL MIAMI, FL City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

CONNOR, SETH Name: Name: 9100 SW 97TH AVE Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD KRANIS **PSD** 01/18/2002