2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 01, 2006
Secretary of State

DOCUMENT# L05000051411

Entity Name: BALLESTEROS ANESTHESIA SERVICES L.L.C.

Current Principal Place of Business:

3714 S. SUMMERLIN AVE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

3714 S. SUMMERLIN AVE
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 20-3928177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BALLESTEROS, JORGE MANUEL
3714 S. SUMMERLIN AVE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BALLESTEROS, JORGE M
Address: 3714 S. SUMMERLIN AVE
City-St-Zip: ORLANDO, FL 32806

Title: MGRM ( ) Delete
Name: BALLESTEROS, SUSAN J
Address: 3714 S. SUMMERLIN AVE
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: BALLESTEROS, SUSAN J
Address: 3714 S. SUMMERLIN AVE
City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: SUSAN BALLESTEROS MGR 06/01/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date