

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 08, 2011
Secretary of State

Entity Name: PINNACLE ANESTHESIA, LLC

Current Principal Place of Business:

6253 MIRAMONTE DR. #104
ORLANDO, FL 32835 US

New Principal Place of Business:

277COBLENTZ ST
PORT CHARLETTE, FL 33954 US

Current Mailing Address:

6253 MIRAMONTE DR. #104
ORLANDO, FL 32835 US

New Mailing Address:

277COBLENTZ ST
PORT CHARLETTE, FL 33954 US

FEI Number: 26-0800887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOROZ, SVETLANA
6253 MIRAMONTE DR#104
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

MOROZ, SVETLANA
277 COBLENTZ ST
PORT CHARLETT, FL 33954 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: SVETLANA MOROZ

03/08/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MS
Name: MOROZ, SVETLANA
Address: 277 COBLENTZ ST
City-St-Zip: PORT CHARLETTE, FL 33954 US

I hereby 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: SVETLANA MOROZ

MRS

03/08/2011

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