

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002983

FILED
Apr 14, 2009
Secretary of State

Entity Name: GULFSTREAM ANESTHESIA GROUP, LLC

Current Principal Place of Business:

2140 WEST 68TH STREET, SUITE 300-305
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2140 WEST 68TH STREET, SUITE 300-305
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 32-0229760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADERAL, FRANCISCO R
2140 W 68 STREET #305
HIALEAH, FL 33016 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: MGR () Delete
Name: MADERAL, FRANCISCO R
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: PINA, VICTOR M
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: PADILLA, VICTOR M
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: AVILA, MARK S
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: CASTANESA, JORGE S
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

Title: MGRM () Delete
Name: MARTINEZ, JOSE L
Address: 2140 WEST 68TH STREET, SUITE 300-305
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES:

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

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

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

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

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

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

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 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: FRANCISCO R MADERAL

MGR

04/14/2009

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