

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000042275

FILED
Apr 19, 2011
Secretary of State

Entity Name: SUNCOAST ADVANCED SURGERY, PLLC

Current Principal Place of Business:

10441 QUALITY DRIVE
SUITE 301 MEDICAL ARTS BUILDING
SPRING HILL, FL 34609 US

New Principal Place of Business:

10441 QUALITY DRIVE
SUITE 303 - MEDICAL ARTS BUILDING
SPRING HILL, FL 34609 US

Current Mailing Address:

10441 QUALITY DRIVE
SUITE 301 MEDICAL ARTS BUILDING
SPRING HILL, FL 34609 US

New Mailing Address:

10441 QUALITY DRIVE
SUITE 303 - MEDICAL ARTS BUILDING
SPRING HILL, FL 34609 US

FEI Number: 27-2392556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MADANI, SHEADA ESQUIRE
37837 MERIDIAN AVENUE
SUITE 100
DADE CITY, FL 33525 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
Name: BABEL, NITIN MD
Address: 14535 BRUCE B. DOWNS BOULEVARD, APT 1227
City-St-Zip: TAMPA, FL 33613 US

Title: MGR
Name: JAIN, SURBHI MD
Address: 14535 BRUCE B. DOWNS BOULEVARD, APT 1227
City-St-Zip: TAMPA, FL 33613 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: NITIN BABEL

MGR

04/19/2011

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