

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000085093

FILED
Mar 16, 2011
Secretary of State

Entity Name: IMAS ANESTHESIA CONSULTING LLC

Current Principal Place of Business:

5610 BARNA AVE
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

5610 BARNA AVE
TITUSVILLE, FL 32780

New Mailing Address:

5610 BARNA AVE
TITUSVILLE, FL 32780 US

FEI Number: 27-3243294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANK, IMAS
5610 BARNA AVA
TITUSVILLE, FL 32780 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
Name: IMAS, SVETLANA
Address: 5610 BARNA AVE
City-St-Zip: TITUSVILLE, FL 32780 US

Title: MGRM
Name: FRANK, IMAS
Address: 5610 BARNA AVE
City-St-Zip: TITUSVILLE, FL 32780 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: FRANK IMAS

MGRM

03/16/2011

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