

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000066141

FILED
Mar 20, 2012
Secretary of State

Entity Name: SOUTHWEST ANESTHESIA SOLUTIONS, P.A.

Current Principal Place of Business:

2501 E RETUNDA PKWY
CAPE CORAL, FL 33904

New Principal Place of Business:

2501 E RETUNDA PARKWAY
CAPE CORAL, FL 33904

Current Mailing Address:

2501 E RETUNDA PKWY
CAPE CORAL, FL 33904

New Mailing Address:

8374 MARKET STREET
#245
LAKEWOOD RANCH, FL 34202

FEI Number: 56-2379769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, JOSE R
2501 E RETUNDA PKWY
CAPE CORAL, FL 33904 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: JOSE R. RIVERA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: RIVERA, JOSE R
Address: 2501 E RETUNDA PKWY
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE R. RIVERA

RA

03/20/2012

Electronic Signature of Signing Officer or Director

Date