

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000162556

FILED
Oct 06, 2011
Secretary of State

Entity Name: AMBULATORY SURGERY CENTER OF BOCA RATON GP, INC.

Current Principal Place of Business:

7284 WEST PALMETTO PARK ROAD, #205
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7284 WEST PALMETTO PARK ROAD, #205
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 20-2386697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AHRON, BARRY
2790 N FEDERAL HIGHWAY
SUITE 400
BOCA RATON, FL 33431 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: BARRY AHRON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: ROSENTHAL, KENNETH
Address: 9960 CENTRAL PARK BLVD. SOUTH #302
City-St-Zip: BOCA RATON, FL 33428 US

Title: D
Name: KESSLER, KEVIN
Address: 4800 N FEDERAL HIGHWAY
City-St-Zip: FORT LAUDERDALE, FL 33411

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: BARRY AHRON

Electronic Signature of Signing Officer or Director

MBR

10/06/2011

Date