2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2011
Secretary of State

DOCUMENT# P08000100893

Entity Name: INTRACOASTAL ANESTHESIA, INC,

Current Principal Place of Business:

5030 PIECE ST
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

5030 PIERCE ST
HOLLYWOOD, FL 33021 US

Current Mailing Address:

5030 PIECE ST
HOLLYWOOD, FL 33021 US

New Mailing Address:

5030 PIERCE ST
HOLLYWOOD, FL 33021 US

FEI Number: 80-0310610 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOTT, DAVID L PTD
5030 PIERCE ST
HOLLYWOOD, FL 33021 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

OFFICERS AND DIRECTORS:

Title: PTD
Name: LOTT, DAVID L
Address: 5030 PIERCE ST
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VP,S
Name: LOTT, DIANE
Address: 5030 PIERCE ST
City-St-Zip: HOLLYWOOD, FL 33021 US

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: DAVID LOTT PTD 04/12/2011

Electronic Signature of Signing Officer or Director Date