2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2012
Secretary of State

DOCUMENT# P11000020049

Entity Name: Z M P ANESTHESIA, CRNA, ARNP, MS, INC.

Current Principal Place of Business:

770 CLAUGHTON ISLAND DRIVE - APT. 413
MIAMI, FL 33131

New Principal Place of Business:

1723 SW 2ND AVE
1004
MIAMI, FL 33129

Current Mailing Address:

770 CLAUGHTON ISLAND DRIVE - APT. 413
MIAMI, FL 33131

New Mailing Address:

1723 SW 2ND AVE
1004
MIAMI, FL 33129

FEI Number: 27-5360029 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTES, ZAMARIT
800 CLAUTOGHTON ISLAND DR. STE. #1601
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MONTES, ZAMARIT
1723 SW 2ND AVE
1004
MIAMI, FL 33129 US

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: ZAMARIT MONTES 03/12/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP
Name: MONTES, ZAMARIT
Address: 1723 SW 2ND AVE, UNIT 1004
City-St-Zip: MIAMI, FL 33129

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: ZAMARIT MONTES PD 03/12/2012
Electronic Signature of Signing Officer or Director Date