

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000052220

FILED  
Aug 18, 2004  
Secretary of State

Entity Name: CONTINENTAL ANESTHESIA SERVICES, P.A.

## Current Principal Place of Business:

DEPT OF ANESTHESIA CEDARS MED CTR  
1400 NW 12 AVE  
MIAMI, FL 33136 US

## New Principal Place of Business:

## Current Mailing Address:

DEPT OF ANESTHESIA CEDARS MED CTR  
1400 NW 12 AVE  
MIAMI, FL 33136 US

## New Mailing Address:

FEI Number: 65-0457386      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EBER, SCOTT  
555 NE 34 ST 601  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

TABLADA, GUILLERMO  
DEPT OF ANESTHESIA CEDARS MED CENTER  
1400 NW 12 AVE  
MIAMI, FL 33136 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: GUILLERMO TABLADA

08/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TABLADA, GUILLERMO  
Address: 10300 SW 16ST  
City-St-Zip: MIAMI, FL 33165

Title: S ( ) Delete  
Name: VALDES, OSVALDO  
Address: 15551 SW 54 TERR  
City-St-Zip: MIAMI, FL 33185

Title: T ( ) Delete  
Name: EBER, SCOTT  
Address: 555 NE 34 ST 601  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: CZINN, EDWARD  
Address: 3300 HOLLYWOOD OAKS DR.  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TABLADA, GUILLERMO  
Address: 1232 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: ORTA, JORGE  
Address: 6831 MIAMI LAKEWAY SOUTH  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP (X) Change ( ) Addition  
Name: IZAGUIRRE, FRANCISCO  
Address: 1232 GRANADA BLVD.  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP ( ) Change (X) Addition  
Name: FREYTAG, ALEX  
Address: 755 NORTH SHORE DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP ( ) Change (X) Addition  
Name: MENENDEZ, JULIO  
Address: 2665 SW 37TH AVENUE SUITE 1408  
City-St-Zip: MIAMI, FL 33133 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GUILLERMO TABLADA

P

08/18/2004

Electronic Signature of Signing Officer or Director

Date