**FILE NOW: FILING FEE AFTER MAY 1 IS $550.00**

PROFIT CORPORATION ANNUAL REPORT

**1997**

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000060900 (6)**

1. Corporation Name
**MEADOWS ANESTHESIA SERVICE, P.A.**

| Principal Place of Business | Mailing Address |
|---|---|
| 2255 GLADES RD.<br>SUITE 340W<br>BOCA RATON FL 33431 | 2255 GLADES RD.<br>SUITE 340W<br>BOCA RATON FL 33431-7390 |

3. Date Incorporated or Qualified: 08/26/1993
3a. Date of Last Report: 02/05/1996
4. FEI Number: 65-0431720 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 1382 S.W. 13th Place | 26 One East Broward Boulevard |
| Suite, Apt. #, etc.<br>22 | Suite, Apt. #, etc.<br>27 Suite 1300 |
| City & State<br>23 Boca Raton FL | City & State<br>28 Fort Lauderdale, FL |
| Zip / Country<br>24 33486 / 25 USA | Zip / Country<br>29 33301 / 30 USA |

9. Name and Address of Current Registered Agent
BELOFF, DONN A ESQ.
2255 GLADES RD.
SUITE 340W
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name: Intrastate Registered Agent Corporation
82 Street Address (P.O. Box Number is Not Acceptable): 701 Brickell Avenue, Suite 3000
83
84 City: Miami FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 607, Florida Statutes.

SIGNATURE: By: Donn Beloff, Vice President (NOTE: Registered Agent signature required when reinstating) DATE: April 24, 1997

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>ROGOFF, BENZION M.D.<br>~~2255 GLADES RD SUITE 340W~~ 1382 S.W. 13th Place<br>BOCA RATON FL 33486 | ☐ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | President, Director<br>William R. Welhaf, M.D.<br>1382 S.W. 13th Place<br>Boca Raton, FL 33486 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>DIAZ, PEDRO M.D.<br>2255 GLADES RD., SUITE 340W<br>BOCA RATON FL | ☒ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | Vice President, Director<br>Alfredo Ramos, M.D.<br>1382 S.W. 13th Place<br>Boca Raton, FL 33486 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>CASTENHOLZ, RAYMOND H M.D.<br>~~2255 GLADES RD., SUITE 340W~~ 1382 S.W. 13th Place<br>BOCA RATON FL 33486 | ☐ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | Vice President, Director<br>Stephen Millstein, M.D.<br>1382 S.W. 13th Place<br>Boca Raton, FL 33486 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>LIBSCH, LAWRENCE M.D.<br>~~2255 GLADES RD., SUITE 340W~~ 1382 S.W. 13th Place<br>BOCA RATON FL 33486 | ☐ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | Vice President, Director<br>Alan Frankle, M.D.<br>1382 S.W. 13th Place<br>Boca Raton, FL 33486 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>LIEBERMAN, RICHARD M.D.<br>~~2255 GLADES RD., SUITE 340W~~ 1382 S.W. 13th Place<br>BOCA RATON FL 33486 | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | Vice President, Director<br>Ian Radford, M.D.<br>1382 S.W. 13th Place<br>Boca Raton, FL 33486 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VPD<br>LUCK, GEORGE R M.D.<br>~~2255 GLADES RD., SUITE 340W~~ 1382 S.W. 13th Place<br>BOCA RATON FL | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

MWB

**SIGNATURE:** William R. Welhaf 4-19-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date
William R. Welhaf, President
561-395-7100 X4270
Daytime Phone #