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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER ORDIRECTOR



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

S81775

(6)

DOCUMENT # S81775 . Corporation Name AMBULATORY SURGICAL CARE, P.A.				(6)						
Principal Place of Business Mailing Address									()	
1045 N. COURTENAY PARKWAY MERRITT ISLAND FL 32953			1045 N. COURTENAY PARKWAY MERRITT ISLAND FL 32953							
						Date Incorporated or Qualified	3a . Da	3a. Date of Last Report		
							09/20/1991		06/09/19	995
Principal Place of Business		2a.	2a. Manng Address			4. FEI Number 59-3082994		App		
			26	Suite Apt. #, etc						Not Applicable Additional
Suite, Apt. #,	etc		27	Stille Mile #, etc			5. Certificate of Status Desired			Required
City & State				City & State			6. Election Campaign Financing			May Be
			28		T 6		Trust Fund Contribution 8. This corporation has liability for			d to Fees
Zip	25	Country	29	Zψ	Gount 30	ıry	Honda Statutes	es ∐No	S tax once a	100.002
		d Address of Cu		tered Agent	[4,4]		10. Name and Address of New	Registere	ed Agent	
					8	Name				
AGGARWAL, MUKESH C. 2442 NEWFOUND HARBOR DRIVE MERRITT ISLAND FL 32953					ε	32 Street Add	dress (P.O. Box Number is Not Accept	able)		
						33				
MERRIT	T ISLAND F	L 32953								
					[8	B4 City		F	85 Zi	p Code
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