

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600008

Entity Name: ANESTHESIA ASSOCIATES OF GREATER MIAMI, P.A.

Current Principal Place of Business:

6200 SW 73RD STREET
SOUTH MIAMI, FL 33143

FILED
Apr 26, 2022
Secretary of State
5397957423CC

Current Mailing Address:

3350 SW 148 AVENUE
SUITE #110
MIRAMAR, FL 33027 US

FEI Number: 59-0944132

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEEMA, BALWANT
3350 SW 148 AVENUE
SUITE #110
MIRAMAR, FL 33027 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name FARAH, JORGE
Address 3621 NORTH PROSPECT DR
City-State-Zip: MIAMI FL 33133

Title PRESIDENT, DIRECTOR
Name MEISTER, MICHAEL
Address 5880 S.W. 116TH ST
City-State-Zip: MIAMI FL 33156

Title VP, DIRECTOR
Name POL, GUILLERMO
Address 329 CAMPANA AVE
City-State-Zip: CORAL GABLES FL 33156

Title VP, DIRECTOR
Name RUAN, JUAN E
Address 6240 SW 118 TERRACE
City-State-Zip: MIAMI FL 33156

Title VP, DIRECTOR
Name ZAYDEN CRAYTHORNE, GRACIELA
Address 10825 SW 135 TERRACE
City-State-Zip: MIAMI FL 33176

Title VP, DIRECTOR
Name ZAYED-MOUSTAFA, M HATEM
Address 650 WEST AVE
 1409
City-State-Zip: MIAMI BEACH FL 33139

Title VP, DIRECTOR
Name RICARDO, RUBEN J
Address PO BOX 669036
City-State-Zip: MIAMI FL 33166

Title VP, DIRECTOR
Name CRUZ, CARLOS A
Address 2566 TRAPP AVE
City-State-Zip: COCONUT GROVE FL 33133

Continues on page 2

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: JORGE FARAH

TREASURER

04/26/2022

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title VP, DIRECTOR
Name GABAY, MAURICE
Address 5855 SW 102 ST
City-State-Zip: PINECREST FL 33156

Title VP, DIRECTOR
Name LEE, TRAVIS
Address 808 BRICKELL KEY DRIVE
2207
City-State-Zip: MIAMI FL 33131

Title VP, DIRECTOR
Name CHAVOUSTIE, ERIC
Address 800 WEST AVENUE
APT #745
City-State-Zip: MIAMI BEACH FL 33139

Title VP, DIRECTOR
Name MUNOZ, CARLOS A
Address 3220 MATILDA STREET
City-State-Zip: MIAMI FL 33133

Title VP, DIRECTOR
Name COHEN, ISAAC
Address 1010 BRICKELL AVE
APT 4305
City-State-Zip: MIAMI FL 33131

Title VP, DIRECTOR
Name GOZLAN, ITAI
Address 7560 SW 56TH COURT
City-State-Zip: MIAMI FL 33143

Title VP, DIRECTOR
Name LOUKAS, ANDREW
Address 800 WEST AVENUE
APT 845
City-State-Zip: MIAMI BEACH FL 33139

Title VP, DIRECTOR
Name LARRIEU, RENE
Address 9832 SW 77TH PLACE
City-State-Zip: MIAMI FL 33156

Title VP, DIRECTOR
Name SCHNAKOFKY, ROBERTO
Address 2947 SHIPPING AVENUE
City-State-Zip: MIAMI FL 33133

Title VP, DIRECTOR
Name STEWART, JASON
Address 7015 SW 95TH STREET
City-State-Zip: PINECREST FL 33156