

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000019411

Entity Name: TATIANA ANESTHESIA SERVICES, P.A.

Current Principal Place of Business:

401 E. ROBINSON STREET
403
ORLANDO, FL 32801

Current Mailing Address:

401 E. ROBINSON STREET
403
ORLANDO, FL 32801 US

FEI Number: 27-0723090

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCUEN, TATIANA
401 E. ROBINSON STREET
403
ORLANDO, FL 32801 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 PST
Name MCCUEN, TATIANA
Address 401 E ROBINSON ST. #403
City-State-Zip: ORLANDO FL 32801

Title VP
Name REYES AKININ, RAFAEL
Address 205 TUSCARORA RD.
City-State-Zip: WHISPERING PINES NC 28327

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: TATIANA MCCUEN

PRESIDENT

01/11/2015

Electronic Signature of Signing Officer/Director Detail

Date