

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000011589

Entity Name: SOUTH CENTRAL ANESTHESIA GROUP, CORP

Current Principal Place of Business:

8001 N DALE MABRY HWY
401 D
TAMPA, FL 33614

Current Mailing Address:

8001 N DALE MABRY HWY
401 D
TAMPA, FL 33614 US

FEI Number: 45-4813895

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ RIVERA, EDUARDO L
8001 N DALE MABRY HWY
401 D
TAMPA, FL 33614 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 P/S
Name GONZALEZ RIVERA, EDUARDO L
Address 8001 N DALE MABRY HWY; 401 D
City-State-Zip: TAMPA FL 33614

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: GONZALEZ RIVERA , EDUARDO L

PRES

04/26/2018

Electronic Signature of Signing Officer/Director Detail

Date