

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058544

Entity Name: ANESTHESIA CONSULTANTS OF SOUTH FLORIDA INC.

Current Principal Place of Business:

7990 CORAL WAY
MIAMI, FL 33155

Current Mailing Address:

7990 CORAL WAY
MIAMI, FL 33155 US

FEI Number: 65-0769850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OJEA, JUAN CM.D.
5320 S.W. 72 AVE
MIAMI, FL 33155 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 DR
Name OJEA, JUAN CMD
Address 5320 S.W. 72 AVE
City-State-Zip: MIAMI FL 33155

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: JUAN CARLOS OJEA

OWNER

02/10/2019

Electronic Signature of Signing Officer/Director Detail

Date