

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000102636

Entity Name: PROFESSIONAL SURGICAL ASSISTANTS, INC.

Current Principal Place of Business:

7770 HAWTHORNE AVE
MIAMIBEACH, FL 33141

Current Mailing Address:

7770 HAWTHORNE AVE
MIAMIBEACH, FL 33141

FEI Number: 65-0881977

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LETOURNEAUT, MIGUEL PPRESIDE
7770 HAWTHORNE AVE
MIAMIBEACH, FL 33141 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 DPVS
Name LETOURNEAUT, MIGUEL PPRESIDE
Address 7770 HAWTHORNE AVE
City-State-Zip: MIAMIBEACH FL 33141

Title T
Name LETOURNEAUT, MIGUEL PPRESIDE
Address 7770 HAWTHORNE AVE
City-State-Zip: MIAMIBEACH FL 33141

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: MIGUEL LETOURNEAUT

PRESIDENT

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date