

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000479311

Entity Name: ANESTHESIA OF S. FLORIDA LLC

Current Principal Place of Business:

10400 SW 140TH ROAD
MIAMI, FL 33176

Current Mailing Address:

10400 SW 140TH ROAD
MIAMI, FL 33176 US

FEI Number: 92-0996940

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHOURY, ELIAS
10400 SW 140TH ROAD
MIAMI, FL 33176 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

Authorized Person(s) Detail :

Title AMBR
Name KHOURY, ELIAS
Address 10400 SW 140TH ROAD
City-State-Zip: MIAMI FL 33176

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIAS KHOURY

AMBR

01/15/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date