

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1100000353

Entity Name: MIDTOWN ANESTHESIA GROUP, LLC

Current Principal Place of Business:

4600 LINTON BLVD., SUITE 100
DELRAY BEACH, FL 33445

Current Mailing Address:

4600 LINTON BLVD., SUITE 100
DELRAY BEACH, FL 33445

FEI Number: 27-4594813

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ELENGOLD, HELENE
4600 LINTON BLVD., SUITE 100
DELRAY BEACH, FL 33445 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: HELENE ELENGOLD

04/08/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ELENGOLD, HELENE
Address 4600 LINTON BLVD., SUITE 100
City-State-Zip: DELRAY BEACH FL 33445

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: HELENE ELENGOLD

MGR

04/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date