

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765068

FILED
Apr 03, 2012
Secretary of State

Entity Name: 555 MEDICAL CENTER ASSOCIATION, INC.

Current Principal Place of Business:

555 BILTMORE WAY
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 402867
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 59-2237940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUTIQUE HOSPITALITY MANAGEMENT
555 BILTMORE WAY
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: SUSAN, SOCAS
Address: 555 BILTMORE WAY, SUITE 202
City-St-Zip: CORAL GABLES, FL 33134 US

Title: V
Name: GARCIA, FAUSTINO
Address: 555 BILTMORE WAY, SUITE 102
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T
Name: ARMANDO, HASSUN
Address: 555 BILTMORE WAY, SUITE 201/203
City-St-Zip: CORAL GABLES, FL 33134 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEITH SPACE

RA

04/03/2012

Electronic Signature of Signing Officer or Director

Date