2002-UNIFORM BUSINESS REPORT (UBR)

1. Entity Nan	MENT # M5880 EDICAL CENTER P.A.	5		Sec	retary 0 0-2002 90089 030	f Sta	ate
Principal Place of Business 10534 S.W. 8 ST. MIAMI FL 33174		Mailing Address 10534 S.W. 8 ST. MIAMI FL 33174		_	·		
2. Principal Place of Business		3. Mailing Address		1 14810831 701 83101 71	'INC INTIC RAINI BIIL BINKI NIDII	I STEEL GLOEF EN	#II
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 59-2	 846071	\rightarrow	plied For t Applicable
Zip	Country	Zip	Country	5. Certificate of Status		8.75 Add	litional
	6. Name and Address of Current Re	egistered Agent		7. Name and Address			<u>'</u>
	*35 (48)		Name	•		·	-
TORRE-COYÁ, IVONNE F. 10534 SW 8 ST.			Street Addres	s (P.O. Box Number is Not A	cceptable)		
MIAMI FL	33174			,			
			City	· · · · · · · · · · · · · · · · · · ·	FL	Zip Code	
Tax filing	Signature, typed or printed name of registered agent and oration, is eligible, to satisfy, its Intangible requirement and elects to do so.	FILE NOW!!! After May 1, 2002 Make Check Payable	FEE/IS \$150.00 Fee will be \$550.00 to Department of S	10. Election Cam Trust Fund C	ontribution.	Ådded	O May Be to Fees
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES			
TITLE NAME */ STREET ADDRESS CITY-ST-ZIP	PSD TORRE-COYA, IVONNE F. 115 SW 127 AVE. MIAMI FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		[☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DIEGO, MARIA LUISA 1115 SW 127 AVE. MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP]	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP]	Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		[Change	☐ Addition
indicated of the cor	certify that the information supplied with the on this report or supplemental report is treporation or the receiver or trustee empower, or on an attachment with an address, with	ue and accurate and that my ered to execute this report as	signature shall have th	e same legal effect as if mad	le under oath; that I am	n an officer o	or director