

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000105720

FILED  
Sep 30, 2011  
Secretary of State

**Entity Name:** SELEM MEDICAL CENTER CORP.

**Current Principal Place of Business:**

4800 W FLAGLER ST.,  
SUITE 106  
MIAMI, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

4800 W FLAGLER ST.,  
SUITE 106  
MIAMI, FL 33134

**New Mailing Address:**

**FEI Number:** 65-0885663      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SUAREZ, XIOMARA  
4800 W FLAGLER ST.  
SUITE 106  
MIAMI, 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: XIOMARA SUAREZ-SELEM

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SUAREZ-SELEM, XIOMARA  
Address: 4800 W FLAGLER ST., STE. 106  
City-St-Zip: MIAMI, FL 33134

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: XIOMARA SUAREZ-SELEM

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

09/30/2011

\_\_\_\_\_  
Date