## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1800000546

Entity Name: DR. ZIGMUND ZIEGLER ROBERTO COHEN MEDICAL DOCTOR

HARVARD UNIVERSITY INC.

FILED
Jan 11, 2019
Secretary of State
6402105766CC

## **Current Principal Place of Business:**

**MOUNT ZION 14166** 

14166

JERUSALEM ISRAEL, IS 91411-101

## **Current Mailing Address:**

MOUNT ZION 14166 14166

JERUSALEM ISRAEL, IS 91411-101 IS

FEI Number: 83-1143696 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

RODRIGUES, ANDRES SR, 150 SE 2ND AVENUE 1110 MIAMI, FL 33131 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

Officer/Director Detail:

Title PRESIDENT, MEDICAL DOCTOR Title VP, MEDICAL DOCTOR HARVARD

HARVARD UNIVERSITY MEDICAL SCHOOL DEPARTMENT

Name ROBERTO COHEN, ZIGMUND Name COHEN, ROBERTO PHD,

ZIEGLER PHD,

Address MOUNT ZION 14166

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14166 City-State-Zip: JERUSALEM JERUSALEM 9411001

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Title SEC, Title HARVARD MEDICAL SCHOOL DEPARTMENT

Name ZIEGLER, BERNICE DR, Name BLOOM, BARRY PHD

Address MOUNT ZION 14166 Address MASSACHUSETTS HALL CAMBRIDGE

City-State-Zip: JERUSALEM ISRAEL IS 91411-101 MASSACHUSETTS HALL CAMBRIDGE

City-State-Zip: CAMBRIDGE MA 02138

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: ZIGMUND ZIEGLER ROBERTO COHEN F

**PRESIDENT** 

01/11/2019