## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000068480

**Entity Name: BROWN MEDICAL CENTER CORP** 

**Current Principal Place of Business:** 

913 SW 87TH AVE MIAMI. FL 33174

**Current Mailing Address:** 

913 SW 87TH AVE MIAMI, FL 33174 US

FEI Number: 82-2572512 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAVEZ, BEATRIZ 913 SW 87TH AVE MIAMI, FL 33174 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: BEATRIZ CHAVEZ 01/10/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title

CHAVEZ, BEATRIZ Name CHAVEZ, BEATRIZ Name 913 SW 87TH AVE Address 913 SW 87TH AVE. Address City-State-Zip: MIAMI FL 33174 MIAMI FL 33174 City-State-Zip:

Title VP

TORRES, ROLANDO Name

Address 1645 PALM BEACH LAKES BLVD

#1200

WEST PALM BEACH FL 33401 City-State-Zip:

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.

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**FILED** Jan 10, 2018

**Secretary of State** 

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