

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000081970

**Entity Name:** MEDICAL CENTER INTERNATIONAL, INC

**Current Principal Place of Business:**

5810 SHERIDAN ST  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

5810 SHERIDAN ST  
HOLLYWOOD, FL 33021 US

**FEI Number: 83-2076031**

**Certificate of Status Desired: No**

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

IZQUIERDO, WILSON MD  
5810 SHERIDAN ST  
HOLLYWOOD, FL 33021 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 P  
Name IZQUIERDO, WILSON MD  
Address 5810 SHERIDAN ST  
City-State-Zip: HOLLYWOOD FL 33021-3244

*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: WILSON IZQUIERDO**

**PRESIDENT**

**01/04/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date