

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000063535

Entity Name: SANTOS MEDICAL CENTER COCONUT CREEK INC

Current Principal Place of Business:

5861-5891 LYONS ROAD
COCONUT CREEK, FL 33073

Current Mailing Address:

13780 SW 26TH ST.
SUITE 211
MIAMI, FL 33175 US

FEI Number: 88-3950207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IVETTE H. LEON, P.A.
13687 SW 26 STREET
MIAMI, FL 33175 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: IVETTE H. LEON

04/15/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name SANTOS, ORQUIDEA
Address 13780 SW 26 STREET, SUITE 211
City-State-Zip: MIAMI FL 33175

Title VPD
Name GUTIERREZ, JOSE L
Address 13780 SW 26 STREET, SUITE 211
City-State-Zip: MIAMI FL 33175

Title TD
Name CABRERA, YENISET
Address 13780 SW 26 STREET, SUITE 211
City-State-Zip: MIAMI FL 33175

Title SD
Name PEREZ, YULIA
Address 13780 SW 26 STREET, SUITE 211
City-State-Zip: MIAMI FL 33175

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: ORQUIDEA SANTOS

PRESIDENT

04/15/2023

Electronic Signature of Signing Officer/Director Detail

Date