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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

(5)

SOUTH MIAMI HOSPITAL, INC.

FILED May 19 1997 8:00am Secretary of State



2. Principal Place of Business	Principal Place 6200 SW 73RD MIAMI FL 33143	ST.	Mailing Addr 6200 SW 73RI MIAMI FL 3314	ST.	·····						
Suite, Apt # ofc: Suite, Apt # ofc: Suite								3. Date incorporated or Qualified 10/19/1959			
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LEHMAN, JODY 8900 N. KENDALL DR. LEGAL DEPT. MIAMI FL 33178 44 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and floring sport and sport and set appoints of Section 617.0502. Profit of Stock, Profit of Stock, Profit of Statutes. SIGNATURE 12.	• •										
BBOON N. KENDALL DR. LEGAL DEPT. MIAMI FL 33178 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and framily five, in age accept the poligidisps of. Section 617,0502 and 617,1508. Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. Init! OCORRIGAN, GEORGE STREET ADDRESS 2701 PONCE DE LEON BLVD 15. STREET ADDRESS 2701 PONCE DE LEON BLVD 15. STREET ADDRESS 15. Init! OD			<u></u>		81	Name	***************************************				
LEGAL DEPT. MIAMI FL 33176 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or many an accept the pringatings of, Section 617,0502, Florida Statutes. SIGNATURE SIGNATURE						Street	t Address	ddress (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered upon or both in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered office or registered upon or provided when reintaking. 12	LEGAL C	DEPT.				<u> </u>					
SIGNATURE Signature Signa						'	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,		.	
12	1	to the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	02 and 617.1508, Fe of Florida. Such c gations of, Section 6	forida Statutes, hange was aut 517.0503, Florid	, the abov horized b da Statute	e-named y the col s.	d corpora proparation	tion submits this statement for the s board of directors. I hereby acce	purpose of the app	i changing it pointment as 97	ts registered registered
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