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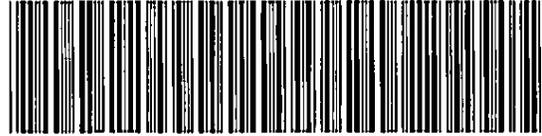
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A F F I D A V I T

FILED
MAY 17 1966
NOTARY PUBLIC

STATE OF FLORIDA)
) SS:
COUNTY OF DADE)

BEFORE ME, the undersigned authority, a Notary Public in and for the State of Florida at Large, there personally appeared Ernest Janis, who, upon being first duly sworn deposes and says that he is the Vice-President of MT. SINAI HOSPITAL OF GREATER MIAMI, INC., a non-profit Florida corporation, and that the following constitute:

1) The Articles of Incorporation and all Amendments thereto of MT. SINAI HOSPITAL OF GREATER MIAMI, INC., a non-profit Florida corporation, dated the 11th day of March 1946 and proved by the Honorable George Holt, Circuit Judge of the 11th Judicial Circuit in and for Dade County, Florida on the 1st day of April, 1946 and recorded in Corporation Book 56 at Pages 365 through 374 of the Public Records of Dade County, Florida.

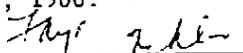
2) Amendment proved by Order amending Charter dated the 14th day of October, 1958, signed by the Honorable Robert L. Floyd, Circuit Judge, and said Amendment and Order duly recorded in Corporation Book 1049 at Page 221 on the 14th day of October, 1958.

DATED at Miami Beach, Florida, this 17 day of May, 1966.



Vice-President

SWORN TO and SUBSCRIBED
before me this 17 day of
May, 1966.



NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

My commission expires:

MAY 1967

C E R T I F I C A T E

I HEREBY CERTIFY that as of the 17 day of May, 1966,
Sonia Goldstein is Vice-President of MT.
SINAI HOSPITAL OF GREATER MIAMI, INC., a non-profit Florida corporation,
duly authorized to execute the foregoing Affidavit.

MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.

BY: *M. G. Goldstein*
ASS'T. Secretary

Certificate of Amendment to the Certificate of Incorporation of MT. SINAI HOSPITAL OF GREATER MIAMI, INC. --- the original charter having been filed in the Circuit Court of Dade County, Florida, on the 1st day of April, A. D., 1946, according to documents filed in this office, --- AMENDING ARTICLE V, filed under the same corporate name of

MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

a corporation not for profit, organized and existing under the Laws of the State of Florida, on the 23rd day of May, A. D., 1966, pursuant to Chapter 617, Florida Statutes, as shown by the records of this office.

23rd

May

66.

IN THE CIRCUIT COURT OF THE ELEVENTH
JUDICIAL CIRCUIT IN AND FOR DADE
COUNTY, FLORIDA.

IN RE: APPLICATION OF MT. :
SINAI HOSPITAL OF GREATER :
MIAMI, INC., TO AMEND ITS :
CHARTER :

RECEIVED
JAN 25 1958
FILED

TO THE HONORABLE JUDGES OF THE CIRCUIT COURT OF THE ELEVENTH
JUDICIAL CIRCUIT IN AND FOR DADE COUNTY, FLORIDA:

Comes now MT. SINAI HOSPITAL OF GREATER MIAMI, INC.,
and represents unto the Court that it is a corporation not for
profit; that its Charter was filed on April 1, 1946, and is on
record in Corporation Book 56, at page 365, of the Public
Records of Dade County, Florida; that at a meeting of its duly
elected Board of Trustees, its governing body, held on October
13, 1958, pursuant to proper notice, and in accordance with its
By-Laws and Charter, the following resolution was duly adopted,
more than two-thirds of the Board of Trustees having voted in
favor of such amendment:

BE IT RESOLVED: That Article IX of the
Articles of Incorporation be stricken, and
in its place be substituted the following:

IX.

The amount of indebtedness to which this
corporation may extend its liability shall
be in the sum of Fourteen Million Dollars
(\$14,000,000.00), or a sum equal in value
to two-thirds (2/3) of the property owned
by the corporation.

BE IT FURTHER RESOLVED: That Article X of
the Articles of Incorporation be stricken,
and in its place be substituted the following:

X.

The amount in value of real estate which the
corporation may hold and own shall be Twenty-
one Million Dollars (\$21,000,000.00), and
shall be subject to the approval of the
Circuit Judge.

WHEREFORE, your petitioner prays that its Charter be amended in accordance with the foregoing resolutions.

MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

BY [Signature]
Its President

ATTEST: [Signature]
Its Secretary

[Signature]
David P. Catsman,
Its Attorney
1633 Lenox Avenue
Miami Beach, Florida

STATE OF FLORIDA : SS.
COUNTY OF DADE :

PERSONALLY APPEARED before me, the undersigned authority, [Signature] J. GERALD LEWIS -- ASSISTANT Secretary of MT. SINAI HOSPITAL OF GREATER MIAMI, INC., who, being duly sworn, deposes and says that he has read the foregoing petition, and that the facts therein set forth are true.

Subscribed and sworn to before me this 13th day of October, 1958.

[Signature]
Notary Public, State of Florida
at large

My commission expires:
Notary Public, State of Florida at large.
My Commission expires Jan. 8, 1960.

IN THE CIRCUIT COURT OF THE ELEVENTH
JUDICIAL CIRCUIT IN AND FOR DADE
COUNTY, FLORIDA.

IN RE: APPLICATION OF MT.
SINAI HOSPITAL OF GREATER : ORDER AMENDING CHARTER
MIAMI, INC. TO AMEND ITS :
CHARTER :

THIS CAUSE coming on to be heard upon the application
of MT. SINAI HOSPITAL OF GREATER MIAMI, INC., a non-profit
corporation, to amend its Charter, and it appearing that proper
corporate action has been taken, and that said proposed
amendments are for an object authorized by law, it is, therefore,

ORDERED, that the Charter of MT. SINAI HOSPITAL OF
GREATER MIAMI, INC., a non-profit corporation under the laws of
the State of Florida, be and the same is hereby amended in the
following respects:

Article IX shall be deleted, and in its place shall
be substituted the following:

IX.

The amount of indebtedness to which this
corporation may extend its liability shall
be in the sum of Fourteen Million Dollars
(\$14,000,000.00), or a sum equal in value
to two-thirds (2/3) of the property owned
by the corporation.

Article X shall be deleted, and in its place shall
be substituted the following:

X.

The amount in value of real estate which
the corporation may hold and own shall be Twenty-
one Million Dollars (\$21,000,000.00), and
shall be subject to the approval of the
Circuit Judge.

14th DONE AND ORDERED in Chambers at Miami, Florida, this
day of October, 1958.

Robert L. Floyd
CIRCUIT JUDGE

State of Florida, County of Dade.
This instrument was filed for record the 14th day of
1958 at 2:20 P.M. and duly recorded in OFFICIAL RECORDS
Book 1047 Page 223 File # 508-15285
E. B. LEATHERMAN
Clerk Circuit Court
E. B. Leatherman

FILED
JUN 11 11 23 AM '56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

I, E. B. LEATHERMAN, Clerk of the Circuit Court of the Eleventh Judicial Circuit in and for the County of Dade and State of Florida DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of a Amendment to Charter
FILED in my office 14 day of Oct A. D. 19 56 and recorded in Official Records Book 1049 at page 221

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal of said Court, this 3 day of May, A. D., 19 56

E. B. LEATHERMAN
Clerk Circuit Court

By H. J. Pease
Deputy Clerk

CT. CT.
Seal

ARTICLES OF INCORPORATION
OF
MT. SIBAI HOSPITAL OF GREATER MIAMI, INC.

FILED

WE, THE UNDERSIGNED, for the purpose of forming a corporation not for profit, pursuant to the provisions of Chapter 617 of the Laws of Florida, 1941, do hereby associate ourselves as a body corporate not for profit and do hereby adopt the following Articles of Incorporation:

I

The name of this corporation shall be MT. SIBAI HOSPITAL OF GREATER MIAMI, INC.

II

The particular objects for which this corporation is formed are as follows:

The foundation, establishment, support, maintenance and management of a non-sectarian general hospital in the Greater Miami area.

To give medical and surgical aid and care, nursing, dispensary and outdoor service to all persons needing medical care and to others of any race, creed or nationality.

To give aid and comfort when needed to the families of those who are receiving treatment in the wards of the hospital and after-care to discharged patients.

To afford students in medicine the opportunity to acquire a practical knowledge of the art and science of medicine.

To promote research in the Medical Science.

To encourage scientific research, to perform charitable work and give charitable services.

To establish, support and maintain clinics of all types and any and all other specialties.

To establish, support, teach and maintain nursing educational facilities.

To encourage all studies for the betterment of mankind.

To solicit and raise funds for endowments or operational expenses and to disburse such funds in accordance with the by-laws of the corporation.

III

MEMBERSHIP:

The membership of this corporation shall be limited to those persons whose qualification and the payment for whose membership shall be regulated by the By-Laws adopted for the government, from time to time, of the corporation, by the Board of Trustees.

IV

This corporation shall have perpetual existence.

V

The corporation shall have the power to:

Take, lease, purchase or otherwise acquire, and to own, use, hold, sell, convey, exchange, lease, mortgage, work, improve, develop, cultivate and otherwise handle, deal in and dispose of, real

estate, real property and any interest or right therein.

Take, purchase or otherwise acquire and to own, hold, sell, convey, exchange, hire, lease, mortgage and otherwise deal in and dispose of, all kinds of personal property, chattels, chattels real, choses in action, notes, bonds, mortgages and securities.

Convert and appropriate any land that may be acquired or be lawfully controlled by the corporation into and for ways, roads, paths, streets, alleys, sidewalks, parks, gardens, boulevards and pleasure grounds; and, generally, to deal with, manage, improve and administer the lands owned and controlled by the corporation or entrusted to its care.

To erect or to have erected, to construct or to have constructed, houses, works, buildings, storerooms, factories, tenements, edifices and structures of every description; and to rebuild, enlarge, improve and alter existing houses, works, buildings, storerooms, tenements, edifices and structures of every description; and to buy, sell, own, use, manage and lease the same or similar structures.

To carry on fund-raising campaigns and to solicit funds for the use of the corporation.

To warrant the title to lands or to any estate or interests in lands sold by said corporation; to issue notes, bonds and debentures secured by mortgage or deeds of trust upon the property of said corporation or otherwise; and to sell and dispose of the same for the benefit of the corporation or for any lawful purpose.

To collect rents and to make repairs and to transact, on commission or otherwise, the general business of a real estate agent, and, generally, the sale, leasing, control and management of lands, buildings and property of all kinds.

To act as agents, factors, brokers, commission merchants, carriers, contractors, builders, architects, decorators, surveyors, engineers, appraisers, lessees, managers of estate or otherwise in entering into, undertaking, performing and carrying out and conducting any and all things set forth in this certificate as objects, purposes or powers that it may do for itself, and to exercise its powers to the same extent that natural persons might do and in any part of the world as to the full extent permitted to corporations organized under the Business Corporation Law of Florida.

To purchase or otherwise acquire and to own, develop, sell, mortgage, or otherwise dispose of,

real estate, real property, and all interests and rights therein, without limit or amount, and to the same extent as natural persons might or could do and in any part of the world.

To contract freely with any person, firm or corporation, private or public, and carry out and fulfill contracts of every sort and kind and to purchase, lease or otherwise acquire any and all rights, privileges and franchises convenient or profitable to carry out in connection with the corporate purposes and corporate business of the corporation.

To borrow money from any person, firm or corporation; to make, issue notes, bills, bonds, indentures, mortgages and other evidences of indebtedness of all kinds and to secure the same by pledge, mortgage or otherwise, without limit as to amount, and to provide for payment of the same by deposited cash, sinking fund or otherwise.

The objects and powers specified in these articles of incorporation shall, except where expressly limited, be in no wise restrained by inference from the terms of any other clause in any part of this charter; but the objects and powers specified in each of the clauses of this charter shall be regarded as independent and separate purposes and powers of the corporation; but all of the benefits to be derived from the exercise of any of the said powers of the corporation shall extend to and be solely for the benefit of the corporation and not for the benefit of its individual members.

VI

GOVERNING BODY:

SECTION 1: The direction and management of the affairs of the corporation shall be vested in a Board of Trustees consisting of not fewer than fifteen (15) nor more than forty (40) members. The Board of Trustees shall be selected in accordance with the By-laws of the corporation; and the power to make, amend and keep in effect, from time to time, said By-laws, shall be vested in the said Board of Trustees. No person shall be competent to be a member of the Board of Trustees who is actively engaged in the practice of medicine or any of its related fields.

Section 2: The corporation shall have as its officers a President, one or more Vice-Presidents, a Secretary and a Treasurer and it may have one or more assistants to any or all of said officers. The extent to which there shall be assistant officers and the number of Vice-Presidents shall be determined from time to time by the Board of Trustees. Officers shall be elected annually, at the annual meeting of the Board of Trustees; but officers, once elected, shall continue to hold office until their successors shall have been elected. No person may be the President, the first Vice-President, the Secretary or the Treasurer of the corporation who is not a member of the Board of Trustees.

VII

OFFICERS:

The officers who shall conduct the affairs of the corporation until the first election of officers are:

VIII

BY-LAWS:

The By-Laws of this corporation shall be made, altered or rescinded by the Board of Trustees in accordance with the provisions contained in the By-laws themselves from time to time.

IX

The amount of indebtedness to which this corporation may extend its liability shall be in the sum of Three Million (\$3,000,000.00) Dollars, or a sum equal in value to two-thirds of the property owned by the corporation.

X

The amount in value of real estate which the corporation may hold and own shall be Five Million (\$5,000,000.00) Dollars and shall be subject to the approval of the Circuit Judge.

XI

These Articles of Incorporation may be amended by a resolution setting forth such amendments, adopted at any meeting of the Board of Trustees; provided, however, that at least thirty (30) days' written notice of such meeting and its purpose shall have been given to all of the members of the Board of Trustees. It shall require a two-thirds vote of the entire Board of Trustees to effect any such amendment.

XII

The names and residences of the subscribers hereto are the following:

MAX BROVITZ,	1795 S.W. 12th Street,	Miami, Florida,
DR. MORRIS GOODMAN,	3619 Flamingo Drive,	Miami Beach, Florida,
ABRAHAM GOODMAN,	3355 Flamingo Drive,	Miami Beach, Florida,
J. GERALD LEWIS,	840 - 40th Street,	Miami Beach, Florida,
MONTE SELIG,	347 N.E. 28th Terrace,	Miami, Florida,
WILLIAM SINGER,	1822 S.W. 12th Avenue,	Miami, Florida,
STANLEY C. MYERS,	512 S.W. 21st Avenue,	Miami, Florida,

ALEX VAN STRAATEN,	1220 Ocean Drive,	Miami Beach, Florida,
HENRY D. WILLIAMS,	4825 Lakeview Drive,	Miami Beach, Florida,
MITCHELL WOLFSON,	4517 Meridian Avenue,	Miami Beach, Florida,
CARL WEINKLE,	1710 Lenox Avenue,	Miami Beach, Florida,
SAM BLANK,	6003 Dillard Drive,	Miami Beach, Florida,
BARON DEHIRSCH MEYER,	Whitehouse Hotel,	Miami Beach, Florida,
A.A. UNGAR,	1152 E.E. 84th Street,	Miami, Florida,
SAMUEL FRIEDLAND,	Shelbourne Hotel,	Miami Beach, Florida,
MOSES GINSBERG,	3700 Pinetree Drive,	Miami Beach, Florida,
MRS. MAX DORRIN,	1120 Alton Road,	Miami Beach, Florida,

IN WITNESS WHEREOF, we have hereunto set our hands and seals at Miami, Dade County, Florida, this 11th day of March, 1946.

Max Orovitz (SEAL)
 MAX OROVITZ

D. Morris Goolman (SEAL)
 DR. MORRIS GOOLMAN

Abraham Goolman (SEAL)
 ABRAHAM GOOLMAN

Gerard Leys (SEAL)
 J. GERALD LEYS

Monte Selig (SEAL)
 MONTE SELIG

William Singer (SEAL)
 WILLIAM SINGER

Stanley C. Myers (SEAL)
 STANLEY C. MYERS

Alex Van Straaten (SEAL)
 ALEX VAN STRAATEN

Henry D. Williams (SEAL)
 HENRY D. WILLIAMS

Mitchell Wolfson (SEAL)
 MITCHELL WOLFSON

Carl Weinkle (SEAL)
 CARL WEINKLE

Sam Blank (SEAL)
 SAM BLANK

Baron De Hirsch Meyer (SEAL)
 BARON DEHIRSCH MEYER

A.A. Ungar (SEAL)
 A.A. UNGAR

Samuel Friedland (SEAL)
 SAMUEL FRIEDLAND

Moses Ginsberg (SEAL)
 MOSES GINSBERG

Mrs. Max Dorrin (SEAL)
 MRS. MAX DORRIN

STATE OF FLORIDA }
COUNTY OF DADE } SS.

BEFORE THE UNDERSIGNED, a Notary Public in and for the State of Florida at Large, personally appeared MAX OROVITZ, DR. MORRIS GOODMAN, ABRAHAM GOODMAN, J. GERALD LEVIS, MONTE SELIG, WILLIAM SINGER, STANLEY C. MYERS, ALEX VAN STRAATEN, HENRY D. WILLIAMS, MITCHELL WOLFSON, CARL WEINKLE, SAM BLANK, BARON DEHIRSCH MEYER, A. A. UNGAR, SAMUEL FRIEDLAND, MOSES GINSBERG and MRS. MAX DOERIN, who, being duly sworn, say that they are subscribers to the foregoing Charter; that it is intended in good faith to carry out the purposes and object set forth in the said Charter.

Max Orovitz (SEAL)
MAX OROVITZ
Dr. Morris Goodman (SEAL)
DR. MORRIS GOODMAN
Abraham Goodman (SEAL)
ABRAHAM GOODMAN
J. Gerald Lewis (SEAL)
GERALD LEVIS
Monte Selig (SEAL)
MONTE SELIG
William Singer (SEAL)
WILLIAM SINGER
Stanley C. Myers (SEAL)
STANLEY C. MYERS
Alex Van Straaten (SEAL)
ALEX VAN STRAATEN
Henry D. Williams (SEAL)
HENRY D. WILLIAMS
Mitchell Wolfson (SEAL)
MITCHELL WOLFSON
Carl Weinkle (SEAL)
CARL WEINKLE
Sam Blank (SEAL)
SAM BLANK
Baron Dehirsch Meyer (SEAL)
BARON DEHIRSCH MEYER
A. A. Ungar (SEAL)
A. A. UNGAR
Samuel Friedland (SEAL)
SAMUEL FRIEDLAND
Moses Ginsberg (SEAL)
MOSES GINSBERG
Mrs. Max Doerin (SEAL)
MRS. MAX DOERIN

STORE TO AND SUBSCRIBED BEFORE ME,

at Miami, Dade County, Florida, this
11th day of March, 1946.

Pauline Arnold
NOTARY PUBLIC, STATE OF FLORIDA AT
LARGE.

My Commission Expires:
August 11th, 1949

THE FOREGOING CHARTER IS APPROVED.

This 1st day of April, 1946

[Signature]
CIRCUIT JUDGE OF THE ELEVENTH JUDI-
CIAL CIRCUIT IN AND FOR DADE COUNTY,
FLORIDA.

FILED
1966 MAY 23 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Florida, County of Dade.
This instrument was filed for record the 1st day of April
1946 at 2:11 P.M. and duly recorded in Book 26
Book 26 on Page 262 File No. V-1234
E. D. LEATHERMAN
Clerk Circuit Court

[Signature]

FILED
1966 MAY 23 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
) SS.
COUNTY OF DADE)

I, E. B. LEATHERMAN, Clerk of the Circuit Court of the Eleventh Judicial Circuit in and for the County of Dade and State of Florida DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of a Charter
FILED in my office 1 day of April A. D. 19 66 and recorded in Confession Book 56 at page 365

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal of said Court, this 3 day of May, A. D., 19 66

E. B. LEATHERMAN
Clerk-Circuit Court

By H. J. Paine
Deputy Clerk

CT. CT.
Seal

\$1 Filing Fee Not Paid. Charter Filed on May 23, 1966

STATE OF FLORIDA

OFFICE

JM-3-66-2 19000 *****1.00

SECRETARY OF STATE

CORPORATION NOT FOR PROFIT

NON-PROFIT SECTION

Designated Place of Business for the Service of Process Within This State, Naming Process May Be Served

FILED
1966 JUN 3 PM
SECRETARY OF STATE

In pursuance of Section 617.023, Florida Statutes, the following is submitted, in compliance with said Act:
First—That MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

a corporation not for profit duly organized and existing under the laws of the State of Florida

with its principal place of business at City of Miami Beach

County of Dade State of Florida

has designated and established 4300 Alton Road
(Street address and building number, P. O. Box address not acceptable)

City of Miami Beach County of Dade

State of Florida as its place of business or domicile for the service of

process within this State, and named as its agents Samuel Gerner

to accept service of process.

Complete the following when there is a change of one or more officers or directors.

OFFICERS: AFFIX TITLES: SPECIFIC ADDRESS
NAME

Officers as per list attached

DIRECTORS: (THREE (3) required by law) SPECIFIC ADDRESS
NAME

LIST OF TRUSTEES ATTACHED

By Sam J. Heiman
Exec. Vice Pres.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity.

By Samuel Gerner
Exec. Vice Pres.

Section 617.023, Florida Statutes, Office and resident agent. Every corporation organized hereunder shall maintain an office in this state with a resident agent thereat upon whom process may be served. The resident agent may be either an individual or a corporation. The corporation shall keep the secretary of state informed of the current city, town or village and street address of said office together with the name of the resident agent.

Filing Fee: \$1.00

CORPORATION NOT FOR PROFIT

No. MP-11,231-A

Resident Agent Certificate

NAME

MT. SINAI HOSPITAL
OF GREATER MIAMI,
INC.

FILED IN THE OFFICE OF
SECRETARY OF STATE
OF FLORIDA

JUNE 3, 1966

TOM ADAMS
SECRETARY OF STATE

BY E. B.

corp-31

NAME OF HOSPITAL MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.
 STREET ADDRESS 4300 ALTON ROAD
 CITY AND STATE MIAMI BEACH, FLORIDA ZIP CODE 33140

OFFICERS
CURRENT TRUSTEES OR DIRECTORS

<u>Name</u>	<u>Street Address</u>	<u>City & State</u>	<u>ZIP Code</u>
<u>Leonard L. Abess President</u>	<u>P. O. Box 3280</u>	<u>Miami, Florida</u>	
<u>James M. Albert</u>	<u>1642 DuPont Bldg.</u>	<u>" "</u>	
<u>Jacob M. Arvey</u>	<u>5255 Collins Av.</u>	<u>Miami Beach, Fla.</u>	
<u>Samuel Blank</u>	<u>P O Box 6188 Sta. B.</u>	<u>Miami, Fla.</u>	
<u>Ben Blum</u>	<u>727 North Shore Dr.</u>	<u>Miami Beach, Fla.</u>	
<u>Shepard Broad</u>	<u>420 Lincoln Rd.</u>	<u>" "</u>	
<u>Jack Carner</u>	<u>6455 Pine Tree Dr. Circle</u>	<u>" "</u>	
<u>David P. Catsman Asst. Secty.</u>	<u>101 E. Flagler St.</u>	<u>Miami, Fla.</u>	
<u>Leo A. Chaikin</u>	<u>P O Box 336, Buena Vista Sta.</u>	<u>" "</u>	
<u>Max V. Cogen Vice Pres.</u>	<u>4404 North Bay Rd.</u>	<u>Miami Beach, Fla.</u>	
<u>Edward L. Cowen</u>	<u>251 N. Shore Av.</u>	<u>" "</u>	
<u>Paul Faske</u>	<u>9674 N.W. 10th Av.</u>	<u>Miami, Fla.</u>	
<u>A.C. Fine Asst. Treas.</u>	<u>6575 Allison Rd.</u>	<u>Miami Beach, Fla.</u>	
<u>Samuel Friedland</u>	<u>P O Box 47 110 N.W. Br.</u>	<u>Miami, Fla.</u>	
<u>Mac Gache</u>	<u>4471 N.W. 36th St.</u>	<u>Miami Spr. Fla.</u>	
<u>Sam A. Goldstein Asst. Secty.</u>	<u>5185 Alton Rd.</u>	<u>Miami Beach, Fla.</u>	
<u>Abraham Goodman</u>	<u>200 Varick St.</u>	<u>New York, N.Y.</u>	
<u>Norris Goodman, M.D.</u>	<u>4428 Chas. Bennett Dr.</u>	<u>Jacksonville, Fla.</u>	
<u>Paul R. Gordon Asst. Treas.</u>	<u>20 Island Av.</u>	<u>Miami Beach, Fla.</u>	
<u>Robert Z. Greene</u>	<u>4411 Pine Tree Dr.</u>	<u>" " "</u>	
<u>Mrs. Jean K. Greenspan</u>	<u>420 Rivo Alto Dr. W.</u>	<u>" " "</u>	
<u>Nathan S. Gumenick</u>	<u>900 West Av.</u>	<u>" " "</u>	
<u>A. J. Harris</u>	<u>120 N.E. 9th St.</u>	<u>Miami, Fla.</u>	
<u>Isadore Hecht</u>	<u>6300 N. Bay Road</u>	<u>Miami Beach, Fla.</u>	
<u>Samuel I. Heiman Vice Pres.</u>	<u>1844 W. Fletcher St.</u>	<u>Miami, Fla.</u>	
<u>Ernest Janis Vice Pres.</u>	<u>4925 Collins Av.</u>	<u>Miami Beach, Fla.</u>	
<u>Howard Kane</u>	<u>1145 N. Shore Dr.</u>	<u>" "</u>	
<u>Aaron Kanner</u>	<u>238 Security Trust Bldg.</u>	<u>Miami, Fla.</u>	
<u>Benjamin G. Kline</u>	<u>6450 Allison Rd.</u>	<u>Miami Beach, Fla.</u>	
<u>Sam C. Levenson Treasurer</u>	<u>1108 Congress Bldg.</u>	<u>Miami, Fla.</u>	
<u>Mrs. Yale N. Levinson</u>	<u>770 N. Shore Dr.</u>	<u>Miami Beach, Fla.</u>	
<u>J. Gerald Lewis V. Chair. of Bd.</u>	<u>101 E. Flagler St.</u>	<u>Miami, Fla.</u>	
<u>Jos. M. Lipton Vice Pres.</u>	<u>101 E. Flagler St.</u>	<u>" "</u>	
<u>Leon Lowenstein</u>	<u>1430 Broadway</u>	<u>New York City</u>	
<u>Mrs. Lois Mathes</u>	<u>4750 Alton Rd.</u>	<u>Miami Beach, Fla.</u>	
<u>Baron de Hirsch Meyer Hon. Pres.</u>	<u>2545 Flamingo Pl.</u>	<u>" " "</u>	

Continued

Hank Meyer	407. Lincoln Rd.	Miami Beach, Fla.
Benjamin Meyers	20 N.W. 1st Av.	Miami, Fla.
A. J. Molasky	4747 Collins Av.	Miami Beach, Fla.
Stanley C. Myers	1150 S.W. First St.	Miami, Fla.
Max Orovitz	Chair. of Bd. 1 Lincoln Rd. Bldg.	Miami Beach, Fla.
Jos. M. Rose	1545 Collins Av.	" " "
Dan B. Runkin	1 Lincoln Rd. Bldg.	" " "
John N. Serbin	1280 S.W. First St.	Miami, Fla.
Jacob Sher	1108 Congress Bldg.	Miami, Fla.
Wm. D. Singer	3800 N.W. 62nd St.	" " "
Harry Sirkin	1 Lincoln Rd. Bldg.	Miami Beach, Fla.
Harold B. Spaet	220 W. Rivo Alto Dr.	" " "
Jos. R. Stein	Box 7 N.W. Branch	Miami, Fla.
Carl Susskind	4501 Nautilus Dr.	Miami Beach, Fla.
Arthur A. Ungar	P O Box 3280	Miami, Fla.
Maj. Albert Warner	745 Fifth Av.	New York City, N.Y.
Abe W. Waxenberg	461 Ocean Blvd.	Golden Beach, Fla.
Carl Weinkle	5255 Collins Av.	Miami Beach, Fla.
Milton Weiss	401 Lincoln Rd.	" " "
Leonard A. Wien	Secty. 5055 N.W. 36th St.	Miami Springs, Fla.
Louis E. Wolfson	6466 N. Bay Rd.	Miami Beach, Fla.
Mitchell Wolfson	P O Box 2440	Miami, Fla.
Samuel Gertner(Exec.	4300 Alton Rd.	Miami Beach, Fla.

(Vice Pres)

**Corporation Report
for Foreign and Domestic Corporations**

TALLAHASSEE
SECRETARY OF STATE
STATE OF FLORIDA

1693

MT SINAI HOSPITAL OF GREATER MIAMI, INC.
4300 Alton Road
Miami Beach, Fla.
33140

1. **MT SINAI HOSPITAL OF GREATER MIAMI, INC.** (General nature of business or activity)
2. **HOSPITAL**

3. **4300 ALTON ROAD** (Give exact name of corporation) **MIAMI BEACH** (City) **FLORIDA** (State)

4. a. **BARON DE HIRSCHMAYER** President **407 Lincoln Rd. Miami Beach, Fla.**
 b. **Max Orvitz** Chairman of the Board **1 Lincoln Rd. Bldg. Miami Beach, Fla.**
 c. **Leonard J. Abasa** Vice-Chairman of Board **P.O. Box 3280 Miami, Fla.**
 d. **David P. Catman** Vice President **101 N. Flagler St. Miami, Fla.**
 e. **Leonard A. Wien** Secretary **5055 W.P. 36th St. Miami Spr. Fla.**
 f. **Howard Kama** Ass. Secy. **420 Lincoln Rd. Miami Beach, Fla.**
 g. **Samuel C. Levenson** Treasurer **Congress Bldg. Miami, Fla.**
 h. **Sam A. Goldstein** Ass. Treasurer **5185 Alton Rd. Miami Beach, Fla.**

5. a. **Max V. Cogen** (Directors - Name) (Law requires at least (3) three) **5161 Collins Av. Miami Beach, Fla.**
 b. **Milton Weiss** **401 Lincoln Rd. Miami Beach, Fla.**
 c. **A. C. Fine** **6575 Allison Rd. Miami Beach, Fla.**
 d. _____
 e. _____
 f. _____

6. **Samuel Gartner** (Resident Agent Name) **Mount Sinai Hospital, Miami Beach, Fla.** (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.023, Florida Statutes.

7. Last meeting of Directors **4/20/67** (Month - Day - Year) 8. Corporation Active? **Yes** (Yes or No) 9. If inactive, inactivity began _____ (Month - Day - Year)

10. If inactive, will corporation begin business in the future? _____ (Yes or No) 11. Date incorporated **1946** (Month - Day - Year) 12. If foreign corporation, date qualified in Fla. _____ (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business _____ 14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

By *Max V. Cogen* President
 Attest: *S. G. Gartner* Secretary

STATE OF Florida
 COUNTY OF Dade

Personally appeared before me _____ who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.
 Sworn to and subscribed before me this 7 day of June, 1967

(Notary Seal) _____
 Signature of Notary in this acknowledgment
 Notary Public, State of Florida at Large
 My Commission Expires April 20, 1971
 Issued by American Ink & Stamp Co.

Send Original to: **TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA**

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Except (Section 609.22(2), Florida Statutes))

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Return This Number
to the Secretary

NP-10931

MT SINAI HOSPITAL OF GREATER MIAMI, INC. 23-09 NP-710931 1968
4300 ALTON ROAD
MIAMI BEACH FLA 33140

1. MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC. (General nature of business or activity)
(Give exact name of corporation) 2. HOSPITAL

3. 4300 ALTON ROAD MIAMI BEACH DADE FLORIDA
(Street or Post Office Box of principal place of business) (City) (County) (State)

4. a. Baron de Hirsch Meyer President 407 Lincoln Rd Miami Beach, Fla.
(Officers' Name) (Title) (Address)

b. Max Grovitz Chairman of the Board 1 Lincoln Rd Bldg Miami Beach, Fla.

c. Leonard I. Abess Vice Chairman of the Board P O Box 3280 Miami Fla

d. David P. Carsman Vice President 101 E. Flagler St. Miami, Fla

e. Leonard A. Wien Vice President 5055 N.W. 36th St. Miami Springs, Fla

f. Howard Kane Assistant Secretary 420 Lincoln Road Miami Beach, Fla

g. Samuel C. Levenson Treasurer Congress Bldg. Miami, Fla

h. Sam A. Goldstein Assistant Treasurer 5825 Collins Av. Miami Beach, Fla.

5. a. _____
(Directors - Name) (Law requires at least (3) three) (Address)

b. Milton Weiss 401 Lincoln Rd. Miami Beach, Fla

c. Max V. Cogen 5161 Collins Av Miami Beach, Fla

d. A. C. Fine 6575 Allison Rd Miami Beach, Fla

e. _____

6. Samuel Gertner Mount Sinai Hospital Miami Beach, Fla.
(Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0221, Florida Statutes.

7. Last meeting of Directors April 15, 1968 8. Corporation Active? Yes 9. If inactive, inactivity began _____
(Month - Day - Year) (Yes or No) (Month - Day - Year)

10. If inactive, will corporation begin business in the future? _____ 11. Date incorporated 1946 12. Date Qualified in Fla. _____
(Yes or No) (Month - Day - Year) (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business. _____ 14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

Baron de Hirsch Meyer
By President of Corporation

Attest: Samuel Gertner
Assistant Treasurer

STATE OF Florida
COUNTY OF Dade

Personally appeared before me Baron de Hirsch Meyer, Samuel C. Levenson
who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 13 day of June 1968.

(Notary Seal) Shigeo Kato
Signature of Notary Making acknowledgment
My Commission Expires April 30, 1971
Printed by American Ink & Color Co.

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY)

Corporation Report for Foreign and Domestic Corporations

(Not For Profit and Exempt (Section 408.2(2), Florida Statutes))

State of Florida
TOM ADAMS
SECRETARY OF STATE
Tallahassee, Florida

Refer to This Number
in All Correspondence

MP-10931

MT SINAI HOSPITAL OF GREATER MIAMI, INC.
4300 ALTON ROAD
MIAMI BEACH FLA 33140

23-09-ND-710931 1969

1. <u> MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC. </u> <small>(Give exact name of corporation)</small>	2. <u> HOSPITAL </u> <small>(General nature of business or activity)</small>
3. <u> 4300 ALTON ROAD </u> <u> MIAMI BEACH </u> <u> DADE </u> <u> FLORIDA </u> <small>(Street or Post Office Box of principal place of business) (City) (County) (State)</small>	
4. a. <u> Max Orovitz </u> <u> 1 Lincoln Road </u> <u> Chair. of the Board </u> <small>(Officer's Name) (Address) (Title)</small>	<u> Miami Beach, Fla. </u> <small>(Address)</small>
b. <u> Samuel C. Levenson </u> <u> 16 Belle Isle </u> <u> Vice-President </u>	<u> Miami Beach, Fla. </u>
c. <u> Edward L. Cowan </u> <u> 910 Lincoln Rd. </u> <u> Vice-President </u>	<u> Miami Beach, Fla. </u>
d. <u> Dan B. Ruskin </u> <u> 1 Lincoln Road </u> <u> Secretary </u>	<u> Miami Beach, Fla. </u>
e. <u> Milton Weiss </u> <u> 401 Lincoln Road </u> <u> Ass't. Secretary </u>	<u> Miami Beach, Fla. </u>
f. <u> Max V. Cogen </u> <u> 5161 Collins Ave </u> <u> Treasurer </u>	<u> Miami Beach, Fla. </u>
g. <u> Sam A. Goldstein </u> <u> 5825 Collins Av. </u> <u> Ass't. Treasurer </u>	<u> Miami Beach, Fla. </u>

5. a. Paul Faske 9674 N.W. 10th Av. Miami Florida
(Directors - Name) (Law requires at least 3) (Address)

 b. A.C. Fine 5750 Collins Av. Miami Beach, Florida

 c. Shepard Broad 420 Lincoln Road Miami Beach, Florida

 d. _____

 e. _____

 f. _____

6. Samuel Gertner North Miami Beach, Florida
(Resident Agent Name) (Address)

Insurance companies are not to complete item 6 pursuant to Section 624.0231, Florida Statutes.

7. Last meeting of Directors Apr. 16, 1969 8. Corporation Active? Yes 9. If inactive, inactivity began _____
(Month - Day - Year) (Yes or No) (Month - Day - Year)

10. If inactive, will corporation begin business in the future? _____ 11. Date Incorporated 1946 12. If foreign corporation, Date Qualified in Fla. _____
(Yes or No) (Month - Day - Year) (Month - Day - Year)

13. If foreign corporation, give the number of States in which you do business _____

14. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.

 Baron de Hirsch Meyer
By President

Attest: Sam A. Goldstein
Assistant Treasurer

STATE OF Florida
COUNTY OF Dade

Personally appeared before me Baron de Hirsch Meyer who deposes and says that he executed this certificate for and in behalf of said corporation and that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 11 day of June 19 69 .

(Notary Seal)

 Faye Jackson
Signature of Notary Making acknowledgment
Notary Public, State of Florida at Large
My Commission Expires April 23, 1971
Revised by Attorney Fee & Company Co.

Send Original to: TOM ADAMS, SECRETARY OF STATE, TALLAHASSEE, FLORIDA.
(SEE INSTRUCTIONS ON BACK OF LAST COPY) ORIGINAL

RICHARD (DICK) STONE
SECRETARY OF STATE
The Capitol
Tallahassee, Florida 32304

State of Florida
Department of State
ANNUAL REPORT
for Corporations and Other Entities

DATE DUE: JAN. 1, 1973
DATE DELINQUENT: MAR. 1, 1973

NAME: Mount Sinai Hospital of Greater Miami, Inc.
ADDRESS: 4300 Alton Road
CITY Miami Beach STATE Florida ZIP 33140

68 627

PLEASE TYPE

CHANGE MAILING ADDRESS TO: _____ Zip _____

1. Mount Sinai Hospital of Greater Miami, Inc. (Exact Corporate Name) 2759-0624424 (Fed. Emp. I.D. No.)

3. 4300 Alton Road (Street Address of Principal Office in Fla.) Miami Beach (City) Dade (County) Florida (State) 33140 (Zip)

4. (a) (Officers Names) (Title) (Street Address) (City) (State)
SCHEDULE ATTACHED
(b) _____
(c) _____
(d) _____

5. (a) (Directors, Trustees, Managers) (Street Address) (City) (State)
SCHEDULE ATTACHED
(b) _____
(c) _____
(d) _____

6. (Florida Resident Agent Name) (Florida Street Address) (City) (Zip)
Hudson Rodgers Mt. Sinai Hosp of Greater Miami-4300 Alton Rd Miami Beach Fla-33140

7. General Nature of Business 8060 See page 2
8. Date Formed or Incorporated 3 / 11 / 46 MO DA YR
9. If Foreign Corporation, Date Qualified in Florida / / MO DA YR

10. Capital Stock (or number and book value of all certificates of interest or participation): SHARES ISSUED

Class or Type	Per or stated Value	Number	Book Value
(a) <u>None</u>			\$ <u>31,955,472.</u>
(b) _____			\$ _____
(c) _____			\$ _____

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined Principle funds

12. Fiscal close of accounting period 12/31 MO DA YR

13. I/WE declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31, 1972 have been paid as required under Chapter 201, Florida Statutes, and I/WE further declare that this report is true and correct.
MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.

(Corporate Seal)
Attest: [Signature]
Assistant Secretary

(Corporate Name)
By: [Signature]
President

Return Original (with Filing Fee) to DEPARTMENT OF STATE
DRAWER 18
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

Corp - AR73

READ INSTRUCTIONS ON BACK

FILING FEE PER PROFIT ENTITY \$5.00
PER NON-PROFIT ENTITY \$2.00

MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.
ANNUAL REPORT

<u>LINES 4 and 5:</u> <u>Name</u>	<u>Title</u>	<u>Address</u>
Max Orovitz	Chairman of the Board	1 Lincoln Road Bldg. Miami Beach, Florida 33139
Baron De Hirschmeyer	Vice Chairman of the Board	407 Lincoln Road Miami Beach, Florida 33139
Samuel Freidland	President	P.O. Box 47-110 -N.W. Branch Miami, Florida 33147
Max V. Cogen	Vice President	11 Island Avenue - Apt. 801 Miami Beach, Florida 33139
Edward L. Cowen	Vice President	% Hentz & Co. 910 Lincoln Road Miami Beach, Florida 33139
Julius Darsky	Vice President	5401 Collins Avenue Miami Beach, Florida 33140
Mrs. Lila G. Heater	Vice President	11 E. Rivo Alto Drive Miami Beach, Florida 33139
Samuel J. Herman	Vice President	990 S.W. 1st Street Miami, Florida 33130
Howard Kane	Vice President	6600 Collins Avenue Miami Beach, Florida 33141
Joseph M. Lipton	Vice President	Dade Federal Bldg. Miami, Florida 33131
Dan B. Ruskin	Vice President	1 Lincoln Road Bldg. Miami Beach, Florida 33139
Edward Shapiro	Vice President	10101 E. Bay Harbor Drive Miami Beach, Florida 33154
Milton Weiss	Vice President	407 Lincoln Road Miami Beach, Florida 33139
Leonard A. Wein	Vice President	5055 N.W. 36th Street Miami Springs, Florida 33166
Shepard Broad	Secretary	420 Lincoln Road Miami Beach, Florida 33139
Paul Faske	Asst. Secretary	998 S.W. 1st Street Miami, Florida 33130
Leonard L. Abess	Treasurer	P.O. Box 3280 Miami, Florida 33130
A.C. Fine	Asst. Treasurer	5750 Collins Avenue Miami Beach, Florida 33140

1061

RICHARD (DICK) STONE
Secretary of State
THE CAPITOL
TALLAHASSEE, FLA.
32304

STATE OF FLORIDA
DEPARTMENT OF STATE
PRIVILEGE TAX RETURN
FOR CORPORATIONS & OTHER ENTITIES

BLK. RT.
U.S. POSTAGE
PAID
TALLAHASSEE, FLA.
PERMIT #88

710931-23-09 05/24/66

ADDRESS CORRECTION REQUESTED

MT SINAI HOSPITAL OF GREATER MIAMI, INC.
4300 ALTON ROAD
MIAMI BEACH FLA 33140

MAR -27 18 -217200 *****2.CC

27 0956

DATE DUE: JAN. 1, 1972

DATE DELINQUENT: MAR. 1, 1972

PLEASE TYPE

Change Mailing Address to: _____

Zip _____

(Exact Corporate Name)

Fed. Emp. I.D. No.

1. Mount Sinai Hospital of Greater Miami Inc.

2. 59-062-4424

(Street Address of Principal Office in Fla.)

(City)

(County)

(State)

(Zip)

3. 4300 Alton Road

Miami Beach

Dade Florida

33140

4. (a) (Officer Name)

(Title)

(Street Address)

(City)

(b) Schedule attached

(c) _____

(d) _____

5. (a) (Director, Trustee, Manager)

(Street Address)

(City)

(b) Schedule attached

(c) _____

(d) _____

6. (Resident Agent Name)

(Street Address)

(City)

7. General Nature of Business Hospital

8. Date Formed or Incorporated: 1/1946

9. If Foreign Corporation, Date Qualified in Florida: / /

10. Capital Stock (or number and book value of all certificates of interest or participation):

Class or Type

Par or Stated Value

Shares Authorized

Number

Book Value

(a) Not applicable

(b) _____

(c) _____

(d) _____

(e) Total Book Value of Stock (Certificates) Issued

11. If you do not have Capital Stock, describe the general rules applicable to all members by which the property rights and interests of each are determined Public owned - Determined by Circuit Court

12. Close of annual accounting period for this return 12/31/71

13. I/We declare that all Florida documentary stamp taxes applicable to corporate stock (or certificates of interest or participation) transactions for the 12 month period ending Dec. 31 have been paid as required under Chapter 201, Florida Statutes, and I/We further declare that this return is true and correct.

MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.

(Corporate Seal)

(Corporate Name)

Attest: Aletha Gifford

By: Samuel ...

Return Original (with Tax Payment) to DEPARTMENT OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA 32304

READ INSTRUCTIONS ON BACK

READ INSTRUCTIONS ON BACK

PRIVILEGE TAX NON-PROFIT ENTITIES \$5.00
PRIVILEGE TAX NON-PROFIT ENTITIES \$2.00

PRIVILEGE TAX NON-PROFIT ENTITIES \$5.00
PRIVILEGE TAX NON-PROFIT ENTITIES \$2.00

MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC.

BOARD OF TRUSTEES

April 22, 1971

Chairman of the Board -----	Max Orovitz
Vice Chairman of the Board -----	Baron de Hirsch Meyer
President -----	Samuel Friedland
Vice President -----	Shepard Broad
Vice President -----	Max V. Cogen
Vice President -----	Julius Darsky
Vice President -----	Paul Faske
Vice President -----	Samuel J. Heiman
Vice President -----	Howard Kane
Vice President -----	Joseph M. Lipton
Vice President -----	Dan B. Ruskin
Vice President -----	Edward Shapiro
Vice President -----	Milton Weiss
Secretary -----	Leonard A. Wien
Assistant Secretary -----	A. C. Fine
Assistant Secretary -----	Sam A. Goldstein
Treasurer -----	Leonard L. Abess
Assistant Treasurer -----	Mrs. Lila G. Heatter

*Abess, Leonard L.	P.O. 3280, Miami, 33101	374-5311
Albert, James M.	169 E. Flagler St., Miami, 33131	379-5669
Arkin, L. Jules	407 Lincoln Rd., Miami Beach, 33139	538-2531
*Arvey, Jacob M. (Col.)	5255 Collins Ave., Miami Beach, 33140	864-0056
*Blank, Samuel	P.O. 310, Miami, 33168	6-3551
*Blum, Harry	5825 Collins Ave., Miami Beach, 33140	866-6110
*Blum, Harry	Expired 10/3/71	
*Broad, Shepard	420 Lincoln Road, Miami Beach, 33139	531-1-09
Brown, Harold	7300 Ponce deLeon Rd., Miami, 33143	661-9950
Catsman, David P.	150 S.E. 2 Ave., Miami, 33131	373-7401
Cogen, Max V.	5161 Collins Ave., Miami Beach, 33140	625-3221
*Cowen, Edward L.	c/o Hentz Co., 910 Lincoln Rd., MB-39	532-877
Darsky, Julius	5401 Collins Ave., Miami Beach, 33140	865-0425
Davidson, Joseph	6401 Pine Tree Dr. Circle, M.B., 33141	531-3767
Don, Mrs. Meyer	5161 Collins Ave., Miami Beach, 33140	866-0355
Faske, Paul	9674 N.W. 10th Ave., Miami, 33150	696-7851
Feldman, Robert S.	7350 N.W. 30th Ave., Miami, 33147	691-3020
Fine, A. C.	5750 Collins Ave., Miami Beach, 33140	866-4259
*Friedland, Samuel	P.O. 47-110 NW Branch, Miami, 33147	696-0620
*Gache, Mac	4471 N.W. 36 St., Mia. Spgs., 33166	751-7561
Gans, Sydney	P.O. 3485, Miami, 33169	625-2666
*Goldstein, Sam A.	16 Island Ave., Miami Beach, 33139	531-2835
*Goodman, Abraham	969 Newark Turnpike, Kearney, N.J., 07032	
*Goodman, Morris (M.D.)	35 E. San Marino Dr., Miami Beach, 33139	531-4159
*Gordon, Paul R.	5001 Collins Ave., Miami Beach, 33140	865-4056
Greene, Robert Z.	4411 Pine Tree Dr., Miami Beach, 33140	534-2209
*Greenspan, Mrs. S. Harvey	420 W. Rivo Alto Dr., Miami Bch., 33139	534-4147
*Gumenick, Nathan S.	900 West Ave., Miami Beach, 33139	672-2412
Hand, Louis	5161 Collins Ave., Miami Beach, 33140	864-7457

*Life Trustee

BOARD OF TRUSTEES (Continued)

*Harris, A. J.	120 N.E. 9th St., Miami, 33132	374-7431
Heatter, Mrs. Lila G.	11 E. Rivo Alto Dr., Miami Bch., 33139	538-5129
Hecht, Isadore	5255 Collins Ave., Miami Beach, 33140	649-3000
Heiman, Samuel J.	990 S.W. First St., Miami, Fla., 33130	358-9211
Kane, Howard	6600 Collins Ave., Miami Beach, 33141	865-4244
*Kann, Samuel	1145 North Shore Dr., Miami Bch., 33141	866-6019
Kanner, Aaron	25 W. Flagler St., Miami, 33130	377-8891
Keller, Henry	18000 State Rd. Nine, Miami, 33162	651-7100
Kelner, Milton	19 W. Flagler St., Miami, 33130	379-4725
*Kline, Benjamin G.	6450 Allison Rd., Miami Beach, 33141	866-4205
Kossoff, Bing	460 W. 84th St., Hialeah, 33014	821-6090
*Levenson, Samuel C.	16 Island Ave., Belle Isle, M.B., 33139	532-8786
Levison, Sydney	803 N. So. Lake Dr., Hollywood, 33020	923-7820
*Lewis, J. Gerald	Dade Federal Bldg., Miami, 33131	379-8986
Lipton, Joseph M.	Dade Federal Bldg., Miami, 33131	377-1671
*Lowenstein, Leon	1430 Broadway, NYC, NY, 10018 (212)	560-5801
Manilow, Nathan	Expired 10/28/71	
Mathes, Mrs. A. Herbert	16 Island Ave., Miami Beach, 33139	538-2238
*Meyer, Baron de Hirsch	5255 Collins Ave., Miami Beach, 33140	538-2531
Meyer, Hank	407 Lincoln Road, Miami Beach, 33139	531-7411
Meyers, Benjamin	802 W. DiLido Dr., Miami Beach, 33139	532-7200
*Molasky, A. J.	4747 Collins Ave., Miami Beach, 33140	531-7018
*Myers, Stanley	1150 S.W. First St., Miami, 33130	371-9041
Nathenson, Harry L.	16 Island Ave., Miami Beach, 33139	538-0532
*Orovitz, Max	One Lincoln Rd. Bldg., Miami Bch., 33139	538-7646
Perlman, Clifford	880 N. E. 195th St., No. Miami Bch. - 62	651-2530
*Rose, Joseph	1545 Collins Ave., Miami Beach, 33139	531-7381
Rosenberg, Julius	5255 Collins Ave., Miami Beach, 33140	865-3665
Rosenberg, Marshal E.	1111 So. Bayshore Dr., Miami, 33131	358-2828
*Ruskin, Dan B.	One Lincoln Road Building, M. B., 33139	538-7646
Russell, Robert	5761 N. W. 37th Ave., Miami, 33142	633-9831
Shapiro, Edward	10101 E. Bay Harbor Dr., M.B., 33154	864-5001
*Sher, Jacob	16 Island Ave., Belle Isle, M.B., 33139	531-0886
*Singer, Wm. D.	1000 Brickell Ave., Miami, 33131	379-4718
*Sirkin, Harry	One Lincoln Rd. Bldg., Miami Bch., 33139	531-7658
*Stein, Joseph	5255 Collins, Apt. 5-A, Mia. Bch., 33140	866-1840
Susskind, Carl	4501 Nautilus Dr., Miami Beach, 33140	531-7781
*Waxenberg, Abe W.	5255 Collins Ave., Miami Beach, 33140	861-0364
*Weinkle, Carl	5255 Collins Ave., Miami Beach, 33140	866-4410
Weiss, Milton	407 Lincoln Rd., Miami Beach, 33139	538-5511
*Wien, Leonard A.	5055 N.W. 36 St., Mia. Springs, 33166	888-5211
Woldenberg, Malcolm	420 Lincoln Rd., Miami Beach, 33139	538-7831
Wolfson, Louis II	306 No. Miami Ave., Miami, 33128	374-6262
*Wolfson, Louis E.	6466 North Bay Rd., Miami Beach, 33141	866-4616
*Wolfson, Mitchell	P.O. 2440, Miami, 33101	374-6262

Ex-officio

Gartner, Samuel, Executive Vice President, Mount Sinai Hospital	532-3611
Gifford, Aletha (Mrs.) Assistant Secretary, Mount Sinai Hospital	532-3611
4300 Alton Road, Miami Beach, Florida, 33140	

*Life Trustee

-2-

awg: 4/22/71

710991 5 2 05/24/1968
 CHARTER NUMBER DATE INC. OR REFORMATION
 DATE QUALIFIED, IN FLA.

ANNUAL REPORT
 FOR CORPORATIONS AND
 OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE
 MAY 10 74 137*** 2.00

3 EXACT NAME
 MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

SECRETARY OF STATE
 RICHARD (DICK) STONE
 P.O. BOX 6327
 TALLAHASSEE, FLA. 32301

DUE JAN 1, 1974 DELINQUENT JULY 1, 1974
 COMP-ART# PAGE 1

4 FED. EMP. LD. NO. 39-064424 5 SICCC 8000
 (SEE PAGE 4)

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

6 ADDRESS
 RUDDENS, HUDSON
 MT SINAI HOSP OF GREATER MIAMI
 4300 ALTON RD
 MIAMI BEACH, FL 33141

4a FED. EMPLOYER ID. NO. 5a SICCC (SEE PAGE 4)

7 OFFICERS/DIRECTORS NAMES CITY / STATE
 FREIDLAND, JONAS MIAMI, FL
 COHEN, MAX V MIAMI BEACH, FL
 BRODERS, JEROME MIAMI BEACH, FL

4b RESIDENT AGENT CHANGE

7a OFFICERS/DIRECTORS STREET ADDRESS TITLE
 Edward Shapiro Miami Beach, Fla. P.
 Shepard Broad VP
 L. Jules Arkin S
 Milton Weiss J

8 FISCAL CLOSE OF ACCOUNTING PERIOD 12

8a FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH)

9 MAILING ADDRESS
 SINAI HOSPITAL OF GREATER MIAMI INC
 4300 ALTON ROAD
 MIAMI BEACH FLA 33140

8b ADDRESS CHANGE AREA

10 PRIMARY STOCK AUTH. STK. PAR VALUE

9b STREET
 9c ADDRESS CLASS OR TYPE PAR. NO. PAR. OR STATED VALUE SHARES AUTHORIZED MARKET PRICE VALUE

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK OR CERTIFICATES OF INTEREST OR PARTICIPATION TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THIS REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

10a IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED
 Non Profit Organization incorporated in the State of Florida

AUTHORIZED SIGNATURE *E. Hudson Rodgers*
 11 TITLE *Mgr. Safety & Security* TEL. NO. *574-2300*

12 RESIDENT AGENT SIGNATURE (IF DIFFERENT FROM NO. 9 (ABOVE))

PLEASE READ INSTRUCTIONS ON PAGE 2
 FILING FEES \$5.00 PROFIT ENTITY \$200 NON PROFIT

1 CHARTER NUMBER **710991**
 2 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA. **09/24/1966**
 3 EXACT NAME **MT. SINAI HOSPITAL OF GREATER MIAMI, INC.**
 4 FED. EMP. I.D. NO. **39-0624424** 5 SICC **8000**
 6 REPORT AGENT **RODGERS, HUDSON**
MT SINAI HOSP OF GREATER MIAMI
4300 ALTON RD
MIAMI BEACH, FL 33141
 7 OFFICERS/DIRECTORS NAMES CITY / STATE

PREIGLAND, SAMUEL	MIAMI, FL	P
COHEN, MAX V	MIAMI BEACH, FL	V
BROAD, SHEPARD	MIAMI BEACH, FL	S

 8 FISCAL CLOSE OF ACCOUNTING PERIOD **12**
710991
MT SINAI HOSPITAL OF GREATER MIAMI INC
4300 ALTON ROAD
MIAMI BEACH FLA 33140
 10 PRIMARY STOCK
 AUTH. STK. _____ PAR. VALUE _____
 I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.
 AUTHORIZED SIGNATURE *R. J. Zuber*
 11 TITLE *Chief Accountant* TEL. NO. **674-2830**

ANNUAL REPORT FOR CORPORATIONS AND OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE
 SEP 19 74 1 287*****2.00

SECRETARY OF STATE
RICHARD (DICK) STONE
 P.O. BOX 8327
 TALLAHASSEE, FLA. 32301
 DUE JAN 1, **1974** DELINQUENT JULY 1, **1974**
 YOUR IMMEDIATE RESPONSE SHALL BE APPRECIATED. CORP. AREA **PAGE 1**

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

4a FED. EMPLOYER ID NO. _____ 5a SICC _____
 6a RESIDENT AGENT CHANGE
 7a OFFICERS/DIRECTORS STREET ADDRESS TITLE

Edward Shapiro	4300 Alton Road	Pres.
L. Jules Arkin		V.P.
Julius Darsky		Secy.
Milton Weiss		Treas.

 IF ADDITIONAL OFFICERS/DIRECTORS, ATTACH ADDENDUM SHEET.
 8a FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH) _____
 9a ADDRESS CHANGE AREA
 9b STREET _____
 ADDRESS _____
 10a CAPITAL STOCK (OR NUMBER) BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION CLASS OR TYPE PAR. NO PAR. OR STATED VALUE SHARES AUTHORIZED

 10b IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

 12 RESIDENT AGENT SIGNATURE _____ IF DIFFERENT FROM NO. 6 (ABOVE)

PLEASE READ INSTRUCTIONS ON PAGE 2
 FILING FEES \$5.00 PROFIT ENTITY \$2.00 NON PROFIT

ANNUAL REPORT FEES
 REGISTRATION FEE
 17.00

CORPORATION ANNUAL REPORT

AUG 28-75 1 573*****200

DUPLICATE—JAN 1 DELINQUENT—JULY 1 VALIDATION AREA - DO NOT WRITE IN THIS SPACE

1 CHARTER NUMBER 710931 2 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA. 03/24/1966 3 SIC SEE ENVELOPE BACK 8060 4 YEAR OF LAST REPORT FILED IN THIS OFFICE 1974

4 FED EMPLOYER ID NO. 09-0624424 5 FISCAL CLOSE OF ACCOUNTING PERIOD (MO) 12 6 YEARS THIS REPORT COVERS 1975

6 CHANGE TO: 6a CHANGE TO:

8 EXACT NAME
MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

DO NOT WRITE IN THIS SPACE

for Division USE ONLY

AUG 28 1975

7 RESIDENT AGENT AND STREET ADDRESS
**WALTER TURNER
 MT SINAI HOSP OF GREATER MIAMI
 4300 ALTON RD
 MIAMI BEACH, FL 33141**

PLEASE READ INSTRUCTIONS ON BACK

NOTICE: IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF CORPORATION. TO COMPLY WITH THIS REQUIREMENT, PLEASE CHANGE THE MAILING ADDRESS TO REFLECT THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED.

9 ADDRESS
**710931
 MT SINAI HOSPITAL OF GREATER MIAMI INC
 4300 ALTON ROAD
 MIAMI BEACH FLA 33140**

10 CHANGE TO
 NO P.O. BOX

9 OFFICERS/DIRECTORS NAMED

NAME	STREET ADDRESS	CITY / STATE	TITLE(S)
SHAPIRO, EDWARD	4300 Alton Road	MIAMI BEACH, FL	PRES. DIR.
BKIN, L. JULES	4300 Alton Road	MIAMI BEACH, FL	V.P.
DARSKY, JULIUS	4300 Alton Road	MIAMI BEACH, FL	SEC.
WEISS, MILTON	4300 Alton Road	MIAMI BEACH, FL	TREAS.
RUDAN, SHEPARD	4300 Alton Road	MIAMI BEACH, FL	DIR. V.P.

10 CAPITAL STOCK
Not for Profit

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

11 CAPITAL STOCK FOR NUMBER & BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION
 CLASS OR TYPE PAR OR NON-PAR OR STATED VALUE SHARES AUTHORITY PRINCIPAL BOOK VALUE

12 IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

AUTHORIZED SIGNATURE Joyce Jones
 Title Comptroller TEL NO. 674-2002
 DATE August 4, 1975

CORPORATION ANNUAL REPORT

ANNUAL REPORT FEE
\$5.00—PROFIT CORP.
\$6.00—NON-PROFIT CORP.

DUE—JAN. 1

DELINQUENT—JULY 1

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

REMIT THIS FORM
A FILING FEE TO

① CHARTER NUMBER
710731

5

② DATE INC. OR IF FOREIGN
DATE QUALIFIED IN FLA.
05/24/1965

③ ENCL. ENVELOPE BACK
8040

1975

YEAR OF LAST REPORT
FILED IN THIS OFFICE

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

④ FED EMPLOYER ID. NO.
57-0674424

⑤ CHANGE TO

1976

YEAR(S) THIS REPORT
COVERS

⑤ EXACT NAME
MT. SINAI HOSPITAL OF GREATER MIAMI, FL

PLEASE READ INSTRUCTIONS ON BACK

⑥ STREET ADDRESS OF PRINCIPAL OFFICE, POST OFFICE BOX ALTHO WILL NOT BE ACCEPTABLE

ADDRESS
710731
MT SINAI HOSPITAL OF GREATER MIAMI INC.
4300 ALTUN ROAD
MIAMI BEACH FLA 33140

⑥a

STREET ADDRESS CHANGE

⑦ REGISTERED
AGENT
AND
STREET
ADDRESS

~~TRINER, WALTER~~
MT SINAI HOSP OF GREATER MIAMI
4300 ALTUN RD
MIAMI BEACH, FL 33140

⑦a

Peter Ledon
REGISTERED AGENT NAME CHANGE
AND/OR ADDRESS CHANGE
INCLUDE REGISTERED OFFICE ADDRESS
Zip Code 33140

⑧ TYPE CORRECTIONS IN SPACE PROVIDED BELOW STRIKE THROUGH INCORRECT ENTRIES CORRECTIONS MUST BE LEGIBLE
NAMES OF ALL OFFICERS AND DIRECTORS STREET ADDRESS CITY / STATE

TITLES MUST
BE SHOWN

NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN
SHAPIRO, EDWARD	4300 ALTUN RD.	MIAMI BEACH, FL	PRES
SMITH, L. JULES	4300 ALTUN RD.	MIAMI BEACH, FL	V.P.
SMITH, J. JULIUS	4300 ALTUN RD.	MIAMI BEACH, FL	SFC
Heatter, Lila			
REIS, MILTON	4300 ALTUN RD.	MIAMI BEACH, FL	TRES
TRAVIS, SHEPARD	4300 ALTUN RD.	MIAMI BEACH, FL	V.P.

DO NOT WRITE IN THIS SPACE

FOR DIVISION USE ONLY

REC
5/2/76

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPLOYED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 687, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH.

SIGNATURE *Edward Shapiro*

TITLE *President*

TEL. NO. 674-2222

DATE *5/2/76*

CORP-ARTS

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE



Bruce A. Smathers
Secretary of State
Form COR 620

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION ANNUAL REPORT
1977

THIS REPORT MUST BE ACCOMPANIED BY THE \$6 FEE

FILED
MAR 11 8 03 AM 1977

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office: 710931 MT. SINAI HOSPITAL OF GREATER MIAMI, INC. 4300 ALTON ROAD. MIAMI BEACH FLA 33140	2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient. Street Address P.O. Box No. City State Zip Code
--	--

3. Date Incorporated or Qualified To Do Business in Florida 05/24/1966	4. Federal Employer Identification Number (FEIN) 59-0626626	5. Date of Last Report 1976
---	--	--------------------------------

6. Names and Street Addresses of Each Officer and Director			
Names of Officers and Directors	Title Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
Heatter, Lila G. SHAPIRO, EDWARD	PRES	DIR 4300 ALTON RD.	MIAMI BEACH, FL
ARKIN, L. JULES Zorn, Lewis E.	V.P.	4300 ALTON RD.	MIAMI BEACH, FL
HEATTER, LILA Orovitz, W. James	SEC	4300 ALTON RD.	MIAMI BEACH, FL
WEISS, MILTON	TRES	4300 ALTON RD.	MIAMI BEACH, FL
Blank, Jerry BROOK, SHEPARD	V.P.	4300 ALTON RD.	MIAMI BEACH, FL
Darsky, Julius	V.P.	4300 Alton Rd.	Miami Beach, FL.
Heiman, Samuel J.	V.P.	4300 Alton Rd.	Miami Beach, FL.
Kline, Benjamin G.	V.P.	4300 Alton Rd.	Miami Beach, FL.

7. Registered Agent Information: If you wish to change Registered Agent on this form, enter all new information here ▶	Name LEDWIN, PETER City, State and Zip Code MIAMI BEACH, FL 33140	Street Address (Do NOT Use P.O. Box Number) MT SINAI HOSP OF GREATER MIAMI 4300 Alton Rd
	Name City, State and Zip Code	Street Address (Do NOT Use P.O. Box Number)

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapt. 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer: Lila G. Heatter	Title Pres.	Telephone Number
Signature <i>Lila G. Heatter</i>	Date	

THIS REPORT MUST BE ACCOMPANIED BY THE \$6 FEE

NP # 10,937

Amend
715

MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

New Corporation Reincorporation Amendment (\$617.02)

Filed:
May 23, 1966

By: Aaron M. Kanner, Esquire
25 W. Flagler St., Miami,

ORIGINAL CHARTER: MT. SINAI HOSPITAL OF GREATER MIAMI, INC. FILED IN THE CIRCUIT COURT OF DADE COUNTY ON APRIL 1, 1946. FILED IN THIS OFFICE BY AMENDMENT ON MAY 23, 1966, AMENDING ARTICLE V, UNDER THE SAME CORPORATE NAME OF: MT. SINAI HOSPITAL OF GREATER MIAMI, INC.

(A) Resident Agent Certificate Filed June 3, 1966.

8-838

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE (Form COR 620 12-1-77)

FILED FOR WRITE
JAN 9 1978
DIVISION OF STATE CORPORATIONS
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:
710931 MT. SINAI HOSPITAL OF
GREATER MIAMI, INC.
4300 ALTON ROAD
MIAMI BEACH FLA 33140

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address
P.O. Box No.
City
State
Zip Code

3. Date incorporated or Qualified To Do Business in Florida
4. Federal Employer Identification Number (FEIN) 59-0624424
5. Date of Last Report 1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
HEATTER, LILA G.	DIR	X	4300 ALTON RD.	MIAMI BEACH, FL
ARKIN, L. JULES	V.P.	X	4300 ALTON RD.	MIAMI BEACH, FL
ROSEN, LEONARD	SEC		4300 ALTON RD.	MIAMI BEACH, FL
GROVITZ, W. JAMES	TRES	X	4300 ALTON RD.	MIAMI BEACH, FL
BLANK, JERRY	V.P.	X	4300 ALTON RD.	MIAMI BEACH, FL
DARSKY, JULIUS	V.P.	X	4300 ALTON RD.	MIAMI BEACH, FL

7. Registered Agent Information

Name: EUGENE NICHOLSON Street Address (Do NOT Use P.O. Box Number):
MT SINAI HOSP OF GREATER MIAMI

If you wish to change Registered Agent on this form, enter all new information here

City, State and Zip Code: MIAMI BEACH, FL 33140 Street Address (Do NOT Use P.O. Box Number): 4300 ALTON ROAD

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned if it Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Typed Name of Signing Officer: LILA HEATTER Title: PRESIDENT Telephone Number: 674-2222

Signature: Lila G. Heatter Date: January 4, 1978

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS \$10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

CORPORATION
ANNUAL REPORT



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

710931
MT SINAI HOSPITAL OF GREATER MIAMI INC
4300 ALTON ROAD
MIAMI BEACH FLA 33140

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE

MAY 16 1 12 AM 1979

STATE OF FLORIDA
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1 Name and Address of Corporation Principal Office

710931
MT SINAI HOSPITAL OF GREATER MIAMI INC
4300 ALTON ROAD
MIAMI BEACH FLA 33140

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address _____
P.O. Box No _____
City _____
State _____ Zip Code _____

3 Date Incorporated or Qualified To Do Business in Florida 5/23/1966

4 Federal Employer Identification Number (FEIN) 59-0624424

5 Date of Last Report 1978

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
HEATTER, LILA G.	P/D	300 ALTON RD.	MIAMI BEACH, FL
ARKIN, L. JULES	V/D	4300 ALTON RD.	MIAMI BEACH, FL
OROVITZ, JAMES	T/D	4300 ALTON RD.	MIAMI BEACH, FL
BLANK, JERRY	V/D	4300 ALTON RD.	MIAMI BEACH, FL
DARSKY, JULIUS	V/D	4300 ALTON RD.	MIAMI BEACH, FL

7 Registered Agent Information

Name NICHOLSON, EUGENE
Street Address (Do NOT Use P.O. Box Numbers) _____
City, State and Zip Code MIAMI BEACH, FL 33140

If you wish to change Registered Agent on this form, enter all new information below

Name Bess Braun
Executive Offices
Street Address (Do NOT Use P.O. Box Number) 4300 Alton Road
City, State and Zip Code Miami Beach, Fla. 33140

8 See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Typed Name of Signing Officer Lila G. Heatter
Signature *Lila G. Heatter*

Title President & Director

Telephone Number 674-2222

Date January 23, 1979

DO NOT WRITE IN THIS SPACE

5/16 JL

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

<p>CORPORATION ANNUAL REPORT</p>  <p>1980</p> <p>THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE</p>	<p>FLORIDA DEPARTMENT OF STATE George Firestone Secretary of State DIVISION OF CORPORATIONS</p>	<p>DO NOT WRITE IN THIS SPACE</p> <p>FILED</p> <p>JUL 10 12 10 PM '80</p> <p>SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>
--	---	--

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

<p>1. Name and Address of Corporation Principal Office</p> <p>710931 MT SINAI HOSPITAL OF GREATER MIAMI INC 4300 ALTON ROAD MIAMI BEACH FLA 33140</p> <p>If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code</p>	<p>2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient</p> <p>Street Address _____</p> <p>P.O. Box No _____</p> <p>City _____</p> <p>State _____ Zip Code _____</p>
--	---

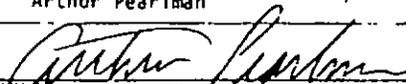
3. Date Incorporated or Qualified To Do Business in Florida	5/23/1966	4. Federal Employer Identification Number (FEIN)	59-0624424	5. Date of Last Report	1979
---	-----------	--	------------	------------------------	------

6. Names and Street Addresses of Each Officer and Director			
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Pearlman, Arthur	P/D	4300 ALTON RD.	MIAMI BEACH, FL
Orovitz, James W.	V/C	4300 ALTON RD.	MIAMI BEACH, FL
Gerson, Gary R.	T/C	4300 ALTON RD.	MIAMI BEACH, FL
Rosenberg, Marshall	V/C	4300 ALTON RD.	MIAMI BEACH, FL
Mark, Arthur	V/C	4300 ALTON RD.	MIAMI BEACH, FL

<p>7. Registered Agent Information</p> <p>Name Ms. Bess Braun</p> <p>Street Address (Do NOT Use P.O. Box Number) 4300 ALTON ROAD</p> <p>City, State and Zip Code MIAMI BEACH, FL 33140</p>	<p>To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.</p>
--	--

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer Arthur Pearlman	Title President	Telephone Number (305) 674-2222
Signature 		Date 5/29/80

NO WRITING IN THIS SPACE
EHP 07/10/80

710931 07-14-80 2 6 735 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1982



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

5204 7/13/82 710931
008 10.0% 35

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

710931
MT SINAI HOSPITAL OF GREATER MIAMI INC
4300 ALTON ROAD
MIAMI BEACH FLA 33140

5203 7/13/82 710931
008 10.0% 35

05/23/1986

59-062424

04/07/1981

ARTHUR, PEARLMAN,	P/D	4300 ALTON RD.	MIAMI BEACH, FL
OROVITZ, JAMES W.	V/D	4300 ALTON RD.	MIAMI BEACH, FL
GERSON, GARY R.	T/D	4300 ALTON RD.	MIAMI BEACH, FL
ROSENBERG, MARSHALL	V/D	4300 ALTON RD.	MIAMI BEACH, FL
MARK, ARTHUR	V/D	4300 ALTON RD.	MIAMI BEACH, FL

Registered Agent Information

SPRON, ROSS, EXECUTIVE OFFICES
4300 ALTON ROAD
MIAMI BEACH, FL

33140

R.M. 7/13

Arthur Pearlman

\$1.00 additional fee required for Registered Agent changes

Arthur Pearlman
Arthur Pearlman President

(305) 674-2222

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

<p>CORPORATION ANNUAL REPORT</p> <p style="text-align: center;">1981</p> <p style="text-align: center;">THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE</p>	<p>FLORIDA DEPARTMENT OF STATE George Firestone Secretary of State DIVISION OF CORPORATIONS</p>	<p>DO NOT WRITE IN THIS SPACE</p> <p>FILED</p> <p>APR 7 10 54 AM '81</p> <p>DEPARTMENT OF STATE TALLAHASSEE, FLORIDA</p>
--	---	---

← READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES →
PLEASE STAPLE CHECK TO ANNUAL REPORT

<p>1. Name and Address of Corporation Principal Office.</p> <p style="border: 1px solid black; padding: 5px;">710931 MT SINAI HOSPITAL OF GREATER MIAMI INC 4300 ALTON ROAD MIAMI BEACH FL 33140</p> <p style="font-size: small;">If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code</p>	<p>2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient</p> <p>Street Address _____</p> <p>P.O. Box No _____</p> <p>City _____</p> <p>State _____ Zip Code _____</p>
---	---

<p>3. Date Corporation or Qualified To Do Business in Florida</p> <p style="text-align: center;">5/23/1966</p>	<p>4. Federal Employer Identification Number (FEIN)</p> <p style="text-align: center;">59-0624428</p>	<p>5. Date of Last Report</p> <p style="text-align: center;">1980</p>
--	---	---

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
ARTHUR, PEARLMAN,	P/O	4300 ALTON RD.	MIAMI BEACH, FL
OROVITZ, JAMES W.	V/D	4300 ALTON RD.	MIAMI BEACH, FL
GERSON, GARY R.	T/D	4300 ALTON RD.	MIAMI BEACH, FL
ROSENBERG, MARSHALL	V/D	4300 ALTON RD.	MIAMI BEACH, FL
MARK, ARTHUR	V/D	4300 ALTON RD.	MIAMI BEACH, FL

<p>7. Registered Agent Information</p> <p>Name _____</p> <p>BROWN, BESS, EXECUTIVE OFFICES</p> <p>Street Address (Do NOT Use P.O. Box Number)</p> <p>4300 ALTON ROAD</p> <p>City, State and Zip Code</p> <p>MIAMI BEACH, FL 33140</p>	<p>To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with this report.</p> <p style="font-size: 2em; text-align: center;"><i>(Signature)</i></p>
--	---

8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

<p>Typed Name of Signing Officer</p> <p>Arthur Pearlman</p>	<p>Title</p> <p>President</p>	<p>Telephone Number</p> <p>305-674-2222</p>
<p>Signature</p> <p><i>Arthur Pearlman</i></p>		<p>Date</p> <p>January 20, 1981</p>

DO NOT WRITE IN THIS SPACE

710931 03-17-81 2 1 334 10.00

se

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1983



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

MAY 23 11 57 AM '83

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

710931
MT SINAI HOSPITAL OF GREATER MIAMI INC
4300 ALTON ROAD
MIAMI BEACH, FLORIDA 33140

05/23/1983

59-0624424

07/13/1982

ARTHUR, PEARLMAN	P/D	4300 ALTON RD.	MIAMI BEACH, FL
OROVITZ, JAMES W.	V/D	4300 ALTON RD.	MIAMI BEACH, FL
GERSON, GARY R.	T/D	4300 ALTON RD.	MIAMI BEACH, FL
ROSENBERG, MARSHALL	V/D	4300 ALTON RD.	MIAMI BEACH, FL
MARK, ARTHUR	V/D	4300 ALTON RD.	MIAMI BEACH, FL

Kovens, Cal - President	4300 Alton Road	Miami Beach, FL 33140
GOLDBERG, Alvin - Exec. Vice Pres.	4300 Alton Road	Miami Beach, FL 33140
SHEPPARD, Arthur N. - Secretary	4300 Alton Road	Miami Beach, FL 33140
OROVITZ, W. JAMES - Treasurer	4300 Alton Road	Miami Beach, FL 33140
PEARLMAN, Arthur - Chairman of the Board	4300 Alton Road	Miami Beach, FL 33140

Registered Agent Information

LIPIANIN, GODFREYA
4300 ALTON ROAD
MIAMI BEACH, FLORIDA 33140

Arthur Pearlman

\$1.00 additional fee required for Registered Agent changes.

KB 5/24

Arthur Pearlman

Arthur Pearlman

4/13/83

Arthur Pearlman

Chairman of the Board

674-2222

90 DAY NOTICE OF INTENT TO DISSOLVE

ANNUAL REPORT
1984



FLORIDA DEPARTMENT OF STATE
George F. Winston
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

SEP 28 10 33 AM 1984

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address
P.O. Box No.
City
State
Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address
P.O. Box No.
City
State
Zip Code

3. Date of Incorporation or Date Most Recent Change of Name: 03/23/1966

4. Federal Employer Identification Number (EIN): 59-0634424

5. Date of Last Report: 05/24/1983

6. Name and Street Address of Each Officer and Director, as of December 31, 1983

Name and Street Address	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
WALTER S. GALT	P	300 ALTON RD.	MIAMI BEACH, FL
WALTER S. GALT	V	300 ALTON RD.	MIAMI BEACH, FL
WALTER S. GALT	T	300 ALTON RD.	MIAMI BEACH, FL
WALTER S. GALT	E/D	300 ALTON RD.	MIAMI BEACH, FL
WALTER S. GALT	S	300 ALTON RD.	MIAMI BEACH, FL

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

9. I, the undersigned, as Secretary of the above-named corporation, organized under the laws of the State of Florida, hereby certify that the above-named corporation, organized under the laws of the State of Florida, has authorized the undersigned to execute this report as required by Chapter 607, F.S. and to accept the appointment of registered agent, and accept the obligations of Section 607.325, F.S.

Signature: _____ DATE: _____

\$2.00 additional fee required for Registered Agent changes.

10. I, the undersigned, as Secretary of the above-named corporation, hereby certify that the above-named corporation, organized under the laws of the State of Florida, has authorized the undersigned to execute this report as required by Chapter 607, F.S. and to accept the appointment of registered agent, and accept the obligations of Section 607.325, F.S.

Signature: Walter S. Galt Title: Executive Vice President

Telephone Number: 305-674-2222

11. I, the undersigned, as Secretary of the above-named corporation, hereby certify that the above-named corporation, organized under the laws of the State of Florida, has authorized the undersigned to execute this report as required by Chapter 607, F.S. and to accept the appointment of registered agent, and accept the obligations of Section 607.325, F.S.

\$5 additional fee required for a Certificate of Status.

CR2002 (17-84)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER MARCH 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1985



DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS AND
BUSINESS REGISTRATION

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office

7169317
MT. SINAI HOSPITAL OF GREATER MIAMI, INC.
4300 ALTON ROAD
MIAMI BEACH, FLORIDA 33140

State of Florida
City and State
Zip Code

3 Date incorporated or qualified To Do Business in Florida 05/23/1966
4 Federal EIN Number 57-0624424
5 Date of Last Report 09/28/1984

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use P.O. Box Number)	City and State
1 KOVENS, CAL	P/C	4300 ALTON RD.	MIAMI BEACH, FL
2 GOLDBERG, ALVIN Raymond S. Alexander	V	4300 ALTON RD.	MIAMI BEACH, FL
3 CANDIB, MURRAY A	S	4300 ALTON RD	MIAMI BCH, FL 33140
4 BROVITZ, W. JAMES George Simon	T	4300 ALTON RD.	MIAMI BEACH, FL
5 PEARLMAN, ARTHUR (CHRM)	G/F	4300 ALTON RD.	MIAMI BEACH, FL
Gary R. Gerson	P	4300 Alton Rd.	Miami Beach, FL

7 Name and Address of Current Registered Agent

8 Name and Address of New Registered Agent

LIPSIAN, GODFREYA
4300 ALTON ROAD
MIAMI BEACH, FLORIDA 33140

9 Pursuant to the provisions of Sections 807.034 and 807.007, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer (or registered agent, or both) in the state of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 807.025 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10 See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. Further Certify That I understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
Other signing must be listed in Block 6!

Signature of Signing Officer: Gary R. Gerson
Title: President
Date: 5/8/85
Telephone Number: 305-674-2222

\$5 additional fee required for a Certificate of Status

710931 Mount Sinai

LEGAL DEPARTMENT

A. BUDD CUTLER, Attorney-at-Law
General Counsel



August 8 1986

Secretary of State
Corporate Records Bureau
P.O. Box 6327
Tallahassee, Florida 32314

000 3121	8/11/86	15.00	12
000 3121	8/11/86	30.00	6
000 3121	8/11/86	45.00	FL

Gentlemen:

Name Change

Enclosed for filing is an original and one copy of our Certificate of Restated and Amended Articles of Incorporation. Our check, in the amount of \$45.00, is also enclosed. This sum represents your filing fee and the charge for two (2) certified copies of the document. Please return these to my attention.

Thank you for your assistance in this matter.

Sincerely,

A. Budd Cutler

A. Budd Cutler
General Counsel

*1000 cc fee due
30.00 overprint*

FILED
1986 AUG 14 PM 1:23
TALLAHASSEE, FLORIDA

ABC:CM
Encl. (s)

Name	SM 812-26
Document Examiner	ADH
Updater	ADH
Updater Verifier	ADH
Acknowledgement	ADH
W. P. Verifier	ADH

TAX	
15	
30	
A. FEE	
45	

Mount Sinai Medical Center of Greater Miami, Inc.
4300 Alton Road, Miami Beach, Florida 33140 Telephone (305) 674-2143

CERTIFICATE OF RESTATED AND AMENDED
ARTICLES OF INCORPORATION

FILED
MAY 14 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE HEREBY CERTIFY that a meeting of the Board of Trustees of MOUNT SINAI HOSPITAL OF GREATER MIAMI, INC. was held at the office of the corporation on March 27, 1986, pursuant to proper notice, for the purpose of amending and Restating the Articles of Incorporation, as amended, filed with Secretary of State on May 23, 1966 together with an amendment filed the same date.

The following resolution was unanimously adopted by the Board of Trustees:

1. Article V B be stricken.
2. Articles IX and X be stricken.
3. Article I be stricken.
4. The Restated and Amended Articles of Incorporation be adopted as follows:

I

The name of this corporation is amended to be:

MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC.

II

The particular objectives for which this corporation is formed are as follows:

The foundation, establishment, support, maintenance and management of a non-sectarian Medical Center.

To provide medical care to persons of any race, creed or nationality.

To conduct educational activities in the health sciences.

To promote and conduct research in the medical and health sciences.

To solicit and raise funds for endowments, capital, or operational expenses and to disburse such funds in accordance with the By-Laws of the Corporation.

To perform such additional charitable, educational, and health related research activities as may be determined from time to time by the Board of Trustees.

III

The membership of this Corporation shall be determined by the By-Laws of the Corporation.

IV

This Corporation shall have perpetual existence.

V

The Corporation shall have the power to:

Take, lease, purchase or otherwise acquire, and to own, use, hold, sell, convey, exchange, lease, mortgage, work, improve, develop, cultivate and otherwise handle, deal in and dispose of, real estate, real property and any interest or right therein.

Take, purchase or otherwise acquire and to own, hold, sell, convey, exchange, lease, mortgage, and otherwise deal in and dispose of, all kinds of personal property, chattels, chattels real, choses in action, notes, bonds, mortgages and securities.

Convert and appropriate any land that may be acquired or be lawfully controlled by the Corporation into and for ways, roads, paths, streets, alleys, sidewalks, parks, gardens, boulevards and pleasure grounds; and generally to deal with, manage, improve and administer the lands owned and controlled by the Corporation or entrusted to its care.

To erect or to have erected, to construct or to have constructed, houses, works, buildings, storerooms, factories, tenements, edifices, and structures of every description; and to rebuild, enlarge, improve and alter existing houses, works, buildings, storerooms, tenements,

edifices and structures of every description; and to buy, sell, own, use, manage and lease the same or similar structures.

To carry on fundraising campaigns and to solicit funds for the use of the Corporation.

To warrant the title to lands or to any estate of interests in lands sold by said Corporation; to issue notes, bonds and debentures secured by mortgage or deeds of trust upon the property of said corporation or otherwise; and to sell and dispose of the same for the benefit of the corporation or for any lawful purpose.

To collect rents and to make repairs and to transact, on commission or otherwise, the general business of a real estate agent, and, generally, the sale, leasing, control and management of lands, buildings and property of all kinds.

To act as agents, factors, brokers, commission merchants, carriers, contractors, builders, architects, decorators, surveyors, engineers, appraisers, lessees, managers of estate or otherwise in entering into, undertaking, performing and carrying out and conducting any and all things set forth in this certificate as objects, purposes or powers that it may do for itself, and to exercise its powers to the same extent that natural persons might do and in any part of the world as to the full extent permitted to corporations organized under the Business Corporation Law of Florida.

To purchase or otherwise acquire and to own, develop, sell, mortgage, or otherwise dispose of, real estate, real property, and all interests and rights therein, without limit or amount, and to the same extent as natural persons might or could do and in any part of the world.

To contract freely with any person, firm or corporation, private or public, and carry out and fulfill contracts of every sort and kind and to purchase, lease or otherwise acquire any and all rights, privileges and franchises convenient or profitable to carry out in connection with the corporate purpose and corporate business of the corporation.

To borrow money from any person, firm, corporation, or entity; to make, issue notes, bills, bonds, indentures, mortgages and other evidences of indebtedness of all kinds and to secure the same by pledge, mortgage or otherwise, without limit as to amount, and to provide for payment of the same by deposited cash, sinking fund or otherwise.

The objects and powers specified in these articles of incorporation shall, except where expressly limited, be in no wise restrained by inference from the terms of any other clause in any part of this charter; but the objects and powers specified in each of the clauses of this charter shall be regarded as independent and separate purposes and powers of the corporation; but all of the benefits to be derived from the exercise of any of the said powers of the corporation shall extend to and be solely for the benefit of the corporation and not for the benefit of its individual members.

To perform such other acts as may be authorized by the Board of Trustees, provided such acts do not violate the laws of the State of Florida or the United States of America.

VI DISTRIBUTION ON DISSOLUTION

The articles are amended to provide that in the event of dissolution, all of the assets and property of the Corporation remaining after the payment (or provision for payment) of the Corporation's debts and obligations and the expenses of dissolution shall be distributed exclusively to one or more organizations then qualified under Section 501(C)(3) of the Internal Revenue Code of 1954, as amended (the "Code") as determined by the Corporation's Board of Trustees.

VII PROHIBITIVE ACTIVITIES

Notwithstanding any other provisions of these Articles, the Corporation shall not carry on any activities not permitted by an organization exempt under the Code and its Regulations as they now exist or as they may be amended.

VIII
GOVERNING BODY

The direction and management of the affairs of the Corporation shall be vested in a Board of Trustees consisting of not fewer than fifteen (15) members.

The Board of Trustees shall be selected in accordance with the By-Laws of the Corporation; and the power to make, amend and keep in effect, from time to time, said By-Laws, shall be vested in the said Board of Trustees.

IX
OFFICERS

The Corporation shall have as its officers a Chairman, a Vice Chairman, a President, one or more Vice Presidents, a Secretary and a Treasurer and it may have one or more assistants to any or all of said officers. The extent to which there shall be assistant officers and the number of Vice Presidents shall be determined from time to time by the Board of Trustees. Officers shall be elected annually, at the annual meeting of the Board of Trustees; but officers, once elected, shall continue to hold office until their successors shall have been elected. No person may be the Chairman, Vice Chairman, President, Vice President, Secretary or Treasurer of the Corporation who is not a member of the Board of Trustees.

X
BY-LAWS

The By-Laws of this Corporation shall be made, altered or rescinded by the Board of Trustees in accordance with the provisions contained in the By-Laws themselves from time to time.

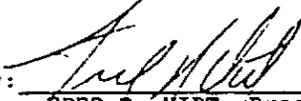
XI
AMENDMENTS

The Articles of Incorporation may be amended in the manner set forth in the By-Laws of the Corporation.

We further certify, that as of the date of this Certificate, said resolution has not been modified or amended and that FRED D. HIRT is President and MURRAY CANDIB is Secretary of the Corporation.

DATED this 30 day of July, 1986.

MOUNT SINAI HOSPITAL OF GREATER
MIAMI, INC.

By: 
FRED D. HIRT, President

ATTEST: 
Secretary

710931



LEGAL DEPARTMENT

A. RUDD CUTLER, Attorney-at-Law
General Counsel

September 8, 1986

Secretary of State
Corporate Records Division
P.O. Box 6327
Tallahassee, Florida 32314

ATTN: Annette Hogan

RE: Mount Sinai Medical Center of Greater Miami
Inc., Document No. 710931, Amended Articles

Dear Ms. Hogan:

Pursuant to your telephone conversation this morning with our office, enclosed is page 6 of our Amended and Restated Articles of Incorporation and Name Change, which was inadvertently left off of the original and which was filed with your office on August 14, 1986.

Please insert this page 6 into our document.

Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "A. Budd Cutler".

A. Budd Cutler
General Counsel

ABC:cm
Encl.

XII

The names and residences of the original subscribers of the Articles of Incorporation on March 11, 1946 were:

MAX OROVITZ	1795 S.W. 12 Street	Miami, Fla.
DR. MORRIS GOODMAN	3619 Flamingo Drive	Miami Beach, Fla.
ABRAHAM GOODMAN	3355 Flamingo Drive	Miami Beach, Fla.
J. GERALD LEWIS	840 - 40th Street	Miami Beach, Fla.
MONTE SELIG	347 N.E. 26th Terrace	Miami, Fla.
WILLIAM SINGER	1822 S.W. 12	Miami, Fla.
STANLEY C. MYERS	512 S.W. 21st Avenue	Miami, Fla.
ALEX VAN STRAATEN	1220 Ocean Drive	Miami Beach, Fla.
HENRY D. WILLIAMS	4825 Lakeview Drive	Miami Beach, Fla.
MITCHELL WOLFSON	4517 Meridian Avenue	Miami Beach, Fla.
CARL WEINKLE	1710 Lenox Avenue	Miami Beach, Fla.
SAM BLANK	6003 Delido Drive	Miami Beach, Fla.
BARON DE HIRSCH MEYER	Whitehouse Hotel	Miami Beach, Fla.
A. A. UNGAR	1132 N.E. 84th Street	Miami, Fla.
SAMUEL FRIEDLAND	Shelbourne Hotel	Miami Beach, Fla.
MOSES GINSBERG	2700 Pinetree Drive	Miami Beach, Fla.
MRS. MAX DOBRIN	1120 Alton Road	Miami Beach, Fla.

We further certify that the adoption of the foregoing resolution and amendments was done in accordance with By-Laws of the corporation, relating thereto and pursuant to F.S. 617.0201(4) and there is no discrepancy between the restated Articles of Incorporation and the Articles of Incorporation as theretofore amended other than the inclusion of the amendments stated herein.

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George F. Jumper
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office 710931 7 MT. SINAI HOSPITAL OF GREATER MIAMI, INC. 4300 ALTON ROAD MIAMI BEACH, FLORIDA 33140	2. Exact Change of Address of Corporation Principal Office (P.O. Box Number Allowed NOT Suit Case)
--	--

3. Date of Incorporation 05/23/1966	4. State of Incorporation FL	5. Federal Identification Number 59-0624424	6. Date of Last Annual Report 05/20/1985
--	---------------------------------	--	---

Name	Position	Address	City	State	Zip
KOVENS, CARL	C	4300 ALTON RD.	MIAMI BEACH, FL		
ALEXANDER, ARNOLD S.	V	4300 ALTON RD.	MIAMI BEACH, FL		
Hart, Fred D.	P	4300 Alton Rd	Miami Beach, FL		
CRADIS, MURRAY A.	S	4300 ALTON RD	MIAMI BCH, FL		00000
SIMON, GEORGE	T	4300 ALTON RD.	MIAMI BEACH, FL		
Gerson, Gary R.	P	4300 ALTON RD.	MIAMI BEACH, FL		
Gerson, Gary R.	VC	4300 Alton Rd	Miami Beach, FL		

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent LIPKININ, GODFREY 4300 ALTON ROAD MIAMI BEACH, FLORIDA 33140	8. Name and Address of New Registered Agent Name: _____ Address: _____ City and State: _____ FL _____
---	--

4. I hereby certify that the information furnished herein is true and correct and that the person named as agent is qualified to act as agent for the corporation in the State of Florida. I further certify that the person named as agent is a resident of the State of Florida and is qualified to act as agent for the corporation in the State of Florida.

SIGNATURE _____

\$3.00 additional fee required for Registered Agent changes.

10. I certify that this report is true and correct and that the person named as agent is qualified to act as agent for the corporation in the State of Florida.

Typed Name of Officer: Carl Kovens Chairman
305-674-2222

CERTIFICATE OF STATUS DENIED

\$5 Additional Fee required for a Certificate of Status

CONFIDENTIAL

CORPORATION WILL BE DISSOLVED IF THIS REPORT IS NOT FILED BY NOV. 16, 1987

CORPORATION
ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
 George F. Winston
 Secretary of State
 DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

87 NOV 13 PM 3:40

SECRET 11/17/87 00126 011

Read Notice and Instructions on Other Side Before Making Entries
 Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

710931
 MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
 4300 ALTON ROAD
 MIAMI BEACH, FLORIDA 33140

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Check Amount for Principal Office, P.O. Box Number, and Additional Office

25.00

3. Street Address 2: TOTAL 25.00

4. P.O. Box No. 77

5. City and State 23

6. Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 05/23/1966
 4. Federal Employer Identification Number (FEIN): 59-0624424
 5. Date of Last Report: 08/28/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

Name of Officers and Director	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number)	City and State
KOVACS, CARL	PC	4300 ALTON RD.	MIAMI BEACH, FL.
HIRT, FRED D.	MX	4300 ALTON RD.	MIAMI BEACH, FL.
GANDES, MURRAY A.	P	4300 ALTON RD.	MIAMI BEACH, FL.
ADLER, SAMUEL I.	S	4300 ALTON RD.	MIAMI BEACH, FL.
SIMON, GEORGE	T	4300 ALTON RD.	MIAMI BEACH, FL.
PERSON, GARY R.	V/C	4300 ALTON ROAD	MIAMI BEACH, FL.

7. Name and Address of Current Registered Agent

LIPIANIN, GEOFREYA
 4300 ALTON ROAD
 MIAMI BEACH, FLORIDA 33140

8. Name and Address of New Registered Agent

Street Address 1 (Do NOT Use P.O. Box Number) 81

Street Address 2 (Do NOT Use P.O. Box Number) 82

City and State 84 FL Zip Code 85

9. Pursuant to the provisions of Sections 807.004 and 807.007, Florida Statute, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of, Section 807.325, F.S.

SIGNATURE _____ DATE _____
 (Registered Agent Accepting Appointment)

10. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath. (Officer signing must be listed in item 6.)

Signature: *Fred D. Hirt* Date: November 2, 1987

Title: President/CEO Telephone Number: 674-2222

11. Should you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED

12. Additional Fee required for a Certificate of Status

CORPORATION

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

APPROVED AND

CORPORATION
ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1988 MAY 16 AM 10:47
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporate Principal Office
710931
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
4300 ALTON ROAD
MIAMI BEACH, FL 33140

7. Exact County of Address of Corporation Principal Office (Do Not Number Above & Below) _____
Street Address 21 _____
PO Box 22 _____
City and State 23 _____
Zip Code 24 _____

3. Date Incorporated in Country: 05/23/1966
4. Federal Employer Identification Number (EIN): 59-0624424
5. Date of Last Filing: 11/13/1967

Name, Address and City/State	Type	Street Address of Firm (Do Not Use P.O. Box Numbers)	City and State
GOVERNOR GARY GERSON	C	4300 ALTON RD.	MIAMI BEACH, FL.
HIRT, FRED D.	P	4300 ALTON RD.	MIAMI BEACH, FL
GREENBERG, MORTY AX	S	4300 ALTON RD	MIAMI BEACH, FL
GOLDBERG, BARTON		4300 ALTON RD.	MIAMI BEACH, FL
ROSEN, ROSEMOE	T	4300 ALTON RD.	MIAMI BEACH, FL
SIDNEY OLSON		4300 ALTON ROAD	MIAMI BEACH, FL.
DEKOR, KARY AX	V/C	4300 ALTON ROAD	MIAMI BEACH, FL.
SAMUEL I. ADLER			

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent
LIPMAN, GODFREY
4300 ALTON ROAD
MIAMI BEACH, FL 33140

I, the undersigned, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and I accept the responsibility of the information furnished herein.

SIGNATURE _____ DATE _____

9. I, the undersigned, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and I accept the responsibility of the information furnished herein.
I Certify That I Am An Officer or Director of the Corporation, or the holder of a Position Entitled to Prepare This Report as Required by Chapter 607, F.S.
Number of Shares Owned by the Registrant: _____
Number of Shares Owned by the Registrant: _____

10. Should you check a certificate of status check the box
CERTIFICATE OF STATUS DERIVED

FILED

FILE NOW, OR THIS CORPORATION WILL BE DISSOLVED OCTOBER 11, 1989!

CORPORATION
ANNUAL REPORT
1989



FLORIDA DEPARTMENT OF STATE
JIM SMITH
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

710931 7
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
4300 ALTON ROAD
MIAMI BEACH, FL 33140-2849

2 Exact Change of Address of Corporation if Mailed Other P.O. Box Number Allowed to Mail Return

Street Address

P.O. Box Number

City and State

Zip Code

1. Make checks payable to the Secretary of State, P.O. Box 1000, Tallahassee, Florida 32304-1000

3 Date incorporated or Qualified to Do Business in Florida

05/23/1966

4 Federal Employer Identification Number (FEIN)

59-0624424

5 Date of Last Report

05/16/1988

6 Name and Street Address of Registered Agent (If Different from Principal Office)

Name	Name of Officer or Director	Street Address (If Different from Principal Office)	City and State
C	GERSON, GARY	4300 ALTON RD.	MIAMI BEACH, FL.
P/D	HIRT, FRED D.	4300 ALTON RD.	MIAMI BEACH, FL.
S/D	GOLDBERG, BARTON	4300 ALTON RD.	MIAMI BEACH, FL.
T/D	OLSON, SIDNEY	4300 ALTON RD.	MIAMI BEACH, FL.
V/C	ADLER, SAMUEL I.	4300 ALTON ROAD	MIAMI BEACH, FL.

REGISTERED AGENT INFORMATION

LIPIANIN, GODFRYA
4300 ALTON ROAD
MIAMI BEACH, FL 33140

SIGNATURE

Registered Agent Accepting Appointment

DATE

10 If a foreign corporation, state the name and address of the principal office in the foreign country.

11 Certify that I am an Officer or Director of the Corporation, or the President or Trustee if organized to exercise the powers of a corporation, and I understand my duties. On this Report I shall have the Same Legal Effects as if Made Under Oath.

Fred D. Hirt
Fred D. Hirt

President & CEO

Date
August 3, 1989

Telephone Number
(305) 674-2222

CERTIFICATE OF STATUS DESIRED

\$5 Annual Fee
- Required by
Chapter 607, F.S.

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

15021400

CORPORATION
ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
JAY SMITH
Secretary of State
244 SOUTH GUY WOOD AVENUE
TALLAHASSEE, FLORIDA 32399

RECEIVED
APPROVED
AND
FILED

90 MAR 13 AM 3:54

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office
710931 7
ZIP + 4 PRESORT
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
4300 ALTON ROAD
MIAMI BEACH, FL 33140-2849

Principal Office of the Corporation
Principal Office of the Corporation
Principal Office of the Corporation
Principal Office of the Corporation

	05/23/1966	59-0624424	
C	GERSON, GARY	4300 ALTON RD.	MIAMI BEACH, FL.
P/D	HIRT, FRED D.	4300 ALTON RD.	MIAMI BEACH, FL
S/D	GOLDBERG, BARTON	4300 ALTON RD	MIAMI BEACH, FL
T/D	OLSON, SIDNEY	4300 ALTON RD.	MIAMI BEACH, FL
V/C	ADLER, SAMUEL I.	4300 ALTON ROAD	MIAMI BEACH, FL.

REGISTERED AGENT INFORMATION

LIPIANIN, GODFREYA
4300 ALTON ROAD
MIAMI BEACH, FL 33140

FL

FRED D. HIRT
PRESIDENT/CEO

(305)674-2222

\$5 Annual Fee
Required by
Chapter 609, F.S.

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION
ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

FILING FEE OF \$61.25 REQUIRED

12 Name and Mailing Address of Corporation: DOCUMENT #710931 (7)
ZIP + 4 PRESORT
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
4300 ALTON ROAD
MIAMI BEACH, FL 33140-2849

2 Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.
21 Street Address
22 P.O. Box No.
23 City and State
24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 05/23/1966
4 FEI Number: 59-0624424
5 FEI Number Applying For: 5 \$8.75 Additional Fee required for a Certificate of Status
6 FEI Number Not Applicable: CERTIFICATE OF STATUS DESIRED

7	8 Name of Officers and Directors	9 Street Address of Each Office and Director (Do NOT use Post Office Box Numbers)	10 City and State
C	GERSON, GARY	4300 ALTON RD.	MIAMI BEACH, FL.
P/D	HIRT, FRED D.	4300 ALTON RD.	MIAMI BEACH, FL.
S/D	GOLDBERG, BARTON	4300 ALTON RD.	MIAMI BEACH, FL.
T/D	OLSON, SIDNEY	4300 ALTON RD.	MIAMI BEACH, FL.
V/C	AGLER, DANIEL F. ORUVITZ, W. JAMES	4300 ALTON ROAD	MIAMI BEACH, FL.

11 REGISTERED AGENT INFORMATION
12 Name and Address of Current Registered Agent:
LIPIANIN, GODFREYA
4300 ALTON ROAD
MIAMI BEACH, FL 33140
13 City and Address of New Registered Agent:
14 Street Address (Do NOT use P.O. Box Numbers)
15 Street Address 2 (Do NOT use P.O. Box Numbers)
16 City

17 I, the undersigned, Secretary of the State of Florida, do hereby certify that the information furnished by the corporation in this report is true and correct and that the corporation has the same and that it is in compliance with the provisions of the laws of the State of Florida, which require the filing of this report as required by Chapter 607, Florida Statutes.
18 I hereby certify that the corporation has paid the fee for this report and accepted the conditions of Section 607.0225, Florida Statutes.
19 I, the undersigned, Secretary of the State of Florida, do hereby certify that the information furnished by the corporation in this report is true and correct and that the corporation has the same and that it is in compliance with the provisions of the laws of the State of Florida, which require the filing of this report as required by Chapter 607, Florida Statutes.
20 I, the undersigned, Secretary of the State of Florida, do hereby certify that the information furnished by the corporation in this report is true and correct and that the corporation has the same and that it is in compliance with the provisions of the laws of the State of Florida, which require the filing of this report as required by Chapter 607, Florida Statutes.
21 Fred D. Hirt
22 President, CEO
23 DATE: 6/30/91
24 Telephone Number (305) 674-2222

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State—\$8.75 Additional Fee required for a Certificate of Status

710931



LEGAL DEPARTMENT

A. BUDD CUTLER, Attorney-at-Law
General Counsel

April 4, 1992

-04/09/92--00:85--002
REGISTERED AGENTS
REGISTERED AGENT--***35.00

TOTAL-----***35.00

Secretary of State
Corporate Records Bureau
Post Office Box 6327
Tallahassee, Florida 32314

Re: Mount Sinai Medical Center of Greater
Miami, Inc. - Change of Registered Agent

Dear Sir/Madam:

Enclosed please find check in the sum of Thirty Five Dollars (\$35.00), payable to you to cover the recording fee for the Notice of Change of Registered Agent, the original of which has been duly executed and is hereby enclosed.

If I may be of further assistance, please contact me.

Thank you.

Sincerely,

Beatriz M. Vizcaya, Secretary to
A. BUDD CUTLER, General Counsel

ABC:bmv
Enclosures

RA Chg.

Name Availability
Document Examiner
Updater
Updater Verifier
Acknowledgment
W. P. Verifier

FILED
APR - 9 11:03:02
TALLAHASSEE, FLORIDA
STATE

NOTICE OF CHANGE OF REGISTERED AGENT

FILED
92 APR -9 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To: Secretary of State
Tallahassee, Florida

1. The name of the Corporation is Mount Sinai Medical Center of Greater Miami, Inc.
2. The current registered office is located at 4300 Alton Road, Miami Beach, Florida 33140.
3. The registered office shall remain unchanged.
4. The current Registered Agent is Gina Lipriani.
5. The new Registered Agent shall be A. Budd Cutler.
6. The street address of the registered office and the street address of the business office of its registered agent, as unchanged, will be identical.
7. The change was authorized by resolution duly adopted by its Board of Trustees (Directors) at a regular meeting on January 23, 1992.

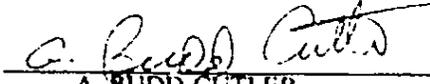
As of the date of the notice, the resolution of the Board of Trustees has not been modified or amended.

DATED, January 23, 1992.

MOUNT SINAI MEDICAL CENTER
OF GREATER MIAMI, INC.

By 
FRED D. HIRT, President

I HEREBY ACCEPT appointment as Registered Agent of Mount Sinai Medical Center of Greater Miami, Inc., and agree to perform the duties required by law.


A. BUDD CUTLER

STATE OF FLORIDA
COUNTY OF DADE

SS

BEFORE ME, personally appeared FRED D. HIRT, to me well known and known to me to be the individual described herein and who executed the foregoing Certificate as President of MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC., and acknowledged before me that he executed same as President of said corporation for the purpose therein expressed and that said instrument is the free act and deed of said corporation.

WITNESS my hand and official seal this 23rd day of January, 1992, at Miami Beach, said County and State aforesaid.

Beatriz M. Viscaya
Notary Public, State of Florida
At Large

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. NOV. 15, 1993
BONDED THRU GENERAL INS. UND.

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC.
NAMES OF OFFICERS AND DIRECTORS

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>CITY AND STATE</u>
C	W. JAMES OROVITZ	4300 ALTON ROAD	MIAMI BEACH, FL
V/C	GEORGE SIMON	4300 ALTON ROAD	MIAMI BEACH, FL
S/D	I. STANLEY LEVINE	4300 ALTON ROAD	MIAMI BEACH, FL
T/D	LEONARD ABESS, JR.	4300 ALTON ROAD	MIAMI BEACH, FL

ABC:brmv
5/12/92

File Now Filing Fee after May 1 is \$225.00

APPROVED AND FILED

93 MAY - 11 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1993



FLORIDA DEPARTMENT OF STATE
IN OFFICE
DIVISION OF CORPORATIONS

1. Name and Mailing Address of Corporation: DOCUMENT # 710931 (7)
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC
4300 ALTON RD
MIAMI BEACH FL 33140-2849
710931

3. Date of Incorporation or Qualification	26. Date of Last Report
05/23/1966	06/09/1992
4. Filing Number	5. Corporation's State of Origin
590624424	FL
6. The total amount of cash and cash equivalents owned by the corporation	7. The total amount of cash and cash equivalents owned by the corporation
\$5.00	\$138.75
8. The total amount of cash and cash equivalents owned by the corporation	9. The total amount of cash and cash equivalents owned by the corporation

FILING FEE \$200.00	ANNUAL REPORT \$61.75 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE	
21. State of Origin	28. Principal Place of Business
22. State of Incorporation	27. State of Incorporation
23. City or County	28. City or County
24. Name	29. Name
25. Address	30. Address

9. Name and Address of Current Registered Agent
CUTLER, A. BUDD
4300 ALTON RD
MIAMI BCH FL 33140

10. Name and Address of New Registered Agent
Name
Street Address
City
State
Zip

11. Pursuant to the provisions of Section 607.02, Florida Statutes, the undersigned hereby certifies that the information furnished herein is true and correct to the best of their knowledge and belief, and that the same is true and correct to the best of their knowledge and belief.

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS
12.1 NAME C OROVITZ, W. JAMES 4300 ALTON RD. MIAMI BEACH FL 33140	13.1 NAME
12.2 NAME P/D HIRT, FRED D. 4300 ALTON RD. MIAMI BEACH FL 33140	13.2 NAME
12.3 NAME S/D LEVINE, I. STANLEY 4300 ALTON RD MIAMI BEACH FL 33140	13.3 NAME
12.4 NAME T/D ABESS, LEONARD, JR. 4300 ALTON RD. MIAMI BEACH FL 33140	13.4 NAME
12.5 NAME V/C SIMON, GEORGE 4300 ALTON ROAD MIAMI BEACH FL 33140	13.5 NAME
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12.99 NAME	13.99 NAME
12.100 NAME	13.100 NAME

14. I certify that the information furnished on this report is true and correct to the best of my knowledge and belief, and that I am a director or officer of the corporation. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).

SIGNATURE: LARRY HUDSON
Senior Vice President/Chief Financial Officer 305-674-2899

Larry Hudson
5/11/93

02-17-93

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

DOXY WAGON
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
For Secretary
Secretary of State
DIVISION OF CORPORATIONS

1. MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI INC

DOCUMENT #
710931 (7)

MIAMI BEACH, FLORIDA

4300 ALTON ROAD
MIAMI BEACH FL 33140

4300 ALTON ROAD
MIAMI BEACH FL 33140

201 1010101 1 101 1 0010-412
+03/21/234-01017-001
*****122.50*****1.25

3. Effective Date of Transfer	05/23/1966	4. Date of Registration	05/01/1993
5. File Number	59-0624424	6. Agency of Origin	
7. Agency of Origin (Number)	58.75 Additional Fee Required	8. Fee	\$5.00
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

CUTLER, A. BUDD
4300 ALTON RD
MIAMI BCH FL 33140

- C
- OROVITZ, W. JAMES
4300 ALTON RD
MIAMI BEACH FL 33140
P.D
- HIRT, FRED D
4300 ALTON RD
MIAMI BEACH FL 33140
S.D
- LEVINE, I. STANLEY
4300 ALTON RD
MIAMI BEACH FL 33140
T.D
- ABESS, LEONARD, JR
4300 ALTON RD
MIAMI BEACH FL 33140
V.C
- SIMON, GEORGE
4300 ALTON ROAD
MIAMI BEACH FL 33140
D.V
- HUDSON LARRY
4300 ALTON RD
MIAMI BEACH FL

FL

SIGNATURE:

James Heller

2-10-94 2-10-94

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Cecilia B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED



1995 MAY - 11 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 710931
1. Corporation Name
MOUNT SINAI MEDICAL CENTER OF GREATER MIAMI, INC.

Principal Place of Business
4300 Alton Road
Miami Beach, FL 33140
Mailing Address
4300 Alton Road
Miami Beach, FL 33140

4000001492254
-05/17/95--01166-024
CORPORATION STATE OF FLORIDA
DON'T WRITE IN THIS SPACE
3. Date Incorporated or Qualified 5/23/66
3a. Date of Last Report 3/9/96
Accepted For Not Applicable
459062424

2. Principal Place of Business
2a. Mailing Address
21. State, A.C., etc.
22. State, A.C., etc.
23. City & State
24. City
25. County
26. City
27. State, A.C., etc.
28. City & State
29. City
30. County

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Total Fund Contribution \$5.00 May Be Added to Fees
7. Compliant with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for redemption tax under S. 1191.002, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
Cutler, A. Budd
4300 Alton Road
Miami Beach, FL 33140

10. Name and Address of New Registered Agent
B1. Name Laurence, Jodi B
B2. Street 4300 Alton Road
B3. Miami Beach
B4. City
B5. State FL
B6. Zip Code 33140

11. Pursuant to the provisions of Sections 607 (a)(2) and 607 (b)(2), Florida Statutes, the undersigned hereby certifies that this statement is true and correct for the purpose of changing the registered office or registered agent, or both, of the State of Florida. Such change was authorized by the corporation's Board of Directors, Members, or the sole member, if any, of the corporation, if any, and is in accordance with the provisions of Sections 607 (b)(2), Florida Statutes.
SIGNATURE *Jodi Laurence* 4/13/95

12. OFFICERS AND DIRECTORS	
CEO	C James W. Orovitz 4300 Alton Road Miami Beach, FL 33140
PP	PP Fred D. Hirt 4300 Alton Road Miami, FL 33140
SD	SD Stanley I Levine 4300 Alton Road Miami Beach, FL 33140
TD	TD Leonard Jr. Abaco 4300 Alton Road Miami, FL 33140
VC	VC George Simon 4300 Alton Road Miami Beach, FL 33140
VD	VD Larry Hudson 4300 Alton Road

13. AGENTS AUTHORIZED TO EXECUTE AND TO RECEIVE SERVICE	
13001	CO Simon, George 4300 Alton Road Miami Beach, FL 33140
13002	VC Hoatter, Lila D. 4300 Alton Road Miami Beach, FL 33140
13003	D Gerson, Gary 4300 Alton Road Miami Beach, FL 33140
13004	D Orovitz, James 4300 Alton Road Miami Beach, FL 33140
13005	D Pearlman, Arthur 4300 Alton Road Miami Beach, FL 33140
13006	D Shapiro, Edward 4300 Alton Road Miami Beach, FL 33140

14. I, the undersigned, certify that the information furnished on this annual report or supplementary annual report is true and accurate and that my signature and seal have been subscribed to the same in accordance with the provisions of Sections 607 (a)(2) and 607 (b)(2), Florida Statutes, and that my name appears in Block 12 or Block 13, as appropriate, of this statement.

SIGNATURE: *[Signature]*
WOULD FURNISH THE NAMES OF PARTIES NAME OF BOARD OFFICER OR DIRECTOR