

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 713052

FILED
Nov 11, 2004
Secretary of State**Entity Name:** GREATER MIAMI PEDIATRIC SOCIETY, INC.**Current Principal Place of Business:**11400 N KENDALL DR
A-211
MIAMI, FL 33176**New Principal Place of Business:****Current Mailing Address:**11400 N KENDALL DR
A-211
MIAMI, FL 33176**New Mailing Address:****FEI Number:** 59-0966131 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LLOSA, GUILLERMO
11400 N KENDAL DR A-211
MIAMI, FL 33176 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: HEDINA, FRANSISCO
Address: 8900 N KENDALL DR
City-St-Zip: MIAMI, FL 33176**Title:** SD () Delete
Name: PRESS, SHIRLEY
Address: 1611 NW 12 AVE
City-St-Zip: MIAMI, FL 33136**Title:** D () Delete
Name: NEWCOMM, PHILLIP
Address: 305 GRANELLO AVE
City-St-Zip: MIAMI, FL 33146**Title:** TD () Delete
Name: LLOSE, GUILLERMO
Address: 11400 N KENDALL DR A-211
City-St-Zip: MIAMI, FL 33176**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: MEDINA, FRANSISCO
Address: 8900 N KENDALL DR
City-St-Zip: MIAMI, FL 33176**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** P (X) Change () Addition
Name: VALDES, ERNESTO
Address: 1550 MADRUGA AVE.
City-St-Zip: CORAL GABLES, FL 33146**Title:** TD (X) Change () Addition
Name: LLOSA, GUILLERMO J
Address: 11400 N KENDALL DR A-211
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GUILLERMO J. LLOSA

TREA

11/11/2004

Electronic Signature of Signing Officer or Director

Date