

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008205

FILED  
Jul 22, 2005  
Secretary of State

Entity Name: ALBERT EINSTEIN COLLEGE OF MEDICINE, CORP.

## Current Principal Place of Business:

141 NE 3RD AVENUE  
SUITE 406  
MIAMI, FL 33132

## New Principal Place of Business:

## Current Mailing Address:

141 NE 3RD AVENUE  
SUITE 406  
MIAMI, FL 33132

## New Mailing Address:

FEI Number: 54-2127061      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

HEFFRON, NOREEN  
141 NE 3RD AVENUE  
SUITE 406  
MIAMI, FL 33132 US

## Name and Address of New Registered Agent:

COHEN, ROBERTO  
141 NE 3RD AVENUE  
SUITE 406  
MIAMI, FL 33132 US

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

SIGNATURE: ROBERTO COHEN

07/22/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: COHEN, ROBERTO  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Delete  
Name: HEFFRON, NOREEN  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Delete  
Name: GORNSTEIN, RENATO  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FRENKEL, URIEL  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

Title: D (X) Change ( ) Addition  
Name: TANK, WILLIAM  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

Title: D ( ) Change (X) Addition  
Name: TELLES, ANDRE  
Address: 141 NE 3RD AVENUE, SUITE 406  
City-St-Zip: MIAMI, FL 33132

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: ROBERTO COHEN

D

07/22/2005

Electronic Signature of Signing Officer or Director

Date