

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000009505

FILED  
Jun 09, 2009  
Secretary of State

**Entity Name:** MOUNT SINAI UNIVERSITY OF FLORIDA, INC.

**Current Principal Place of Business:**

916 NW 104 AVENUE  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

7660 NW 16 COURT  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

916 NW 104 AVENUE  
PEMBROKE PINES, FL 33026

**New Mailing Address:**

7660 NW 16 COURT  
PEMBROKE PINES, FL 33024

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

RAMIREZ, ALFREDO  
916 NW 104 AVENUE  
PEMBROKE PINES, FL 33026      US

**Name and Address of New Registered Agent:**

RAMIREZ, ALFREDO  
7660 NW 16 COURT  
PEMBROKE PINES, FL 33024      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: ALFREDO RAMIREZ

06/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P                      ( ) Delete  
Name: RAMIREZ, ALFREDO  
Address: 916 NW 104 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP                      ( ) Delete  
Name: RAMIREZ, SAUL E  
Address: 916 NW 104 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: S,T                      ( ) Delete  
Name: COLPAS, FARIDES  
Address: 916 NW 104 AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33026

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P                      (X) Change ( ) Addition  
Name: RAMIREZ, ALFREDO  
Address: 7660 NW 16 COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP                      (X) Change ( ) Addition  
Name: RAMIREZ, SAUL E  
Address: 7660 NW 16 COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S,T                      (X) Change ( ) Addition  
Name: COLPAS, FARIDES  
Address: 7660 NW 16 COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALFREDO RAMIREZ

P

06/09/2009

Electronic Signature of Signing Officer or Director

Date