

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90027 014 ****61.25

0024983

DOCUMENT # N21519

1. Entity Name

MIAMI-DADE AREA HEALTH EDUCATION CENTER, INC.

Principal Place of Business

Mailing Address

**7700 NORTH KENDALL DRIVE
SUITE 804
MIAMI FL 33156**

**7700 NORTH KENDALL DRIVE
SUITE 804
MIAMI FL 33156**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0009277

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RAFFERTY, GUTIERREZ, SANCHEZ-ABALLI
1101 BRICKELL AVE
#1400
MIAMI FL 33131**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **V** ☒ Delete
NAME **SANCHEZ, MARTHA**
STREET ADDRESS **7700 NORTH KENDALL DRIVE, SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **D** ☐ Delete
NAME **DAYA, MOHINI**
STREET ADDRESS **7700 NORTH KENDALL DRIVE SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **P** ☐ Delete
NAME **DECARLO, MICHAEL**
STREET ADDRESS **7700 NORTH KENDALL DRIVE SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **T** ☒ Delete
NAME **QUICK, DAVID**
STREET ADDRESS **7700 NORTH KENDALL DRIVE SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **D** ☒ Delete
NAME **PYLES, CAROL**
STREET ADDRESS **7700 NORTH KENDALL DRIVE SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **D** ☒ Delete
NAME **SCHIMPF, PAULA**
STREET ADDRESS **7700 NORTH KENDALL DRIVE SUITE 804**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE **Sack-Michel** ☐ Change ☒ Addition
NAME **Sack-Michel**
STREET ADDRESS **7700 N. Kendall Drive suite 804**
CITY-ST-ZIP **Miami, FL 33156**

TITLE **Executive Director** ☒ Change ☐ Addition
NAME **Martha Sanchez**
STREET ADDRESS **7700 N. Kendall Drive Suite 804**
CITY-ST-ZIP **Miami, FL 33156**

TITLE **D** ☐ Change ☒ Addition
NAME **Eleni D. Sfakianaki**
STREET ADDRESS **7700 N. Kendall Drive Suite 804**
CITY-ST-ZIP **Miami, FL 33156**

TITLE **D** ☐ Change ☒ Addition
NAME **Kathy Malone**
STREET ADDRESS **7700 N. Kendall Drive Suite 804**
CITY-ST-ZIP **Miami FL 33156**

TITLE **D** ☐ Change ☒ Addition
NAME **Steven E. Marcus**
STREET ADDRESS **7700 N. Kendall Drive suite 804**
CITY-ST-ZIP **Miami, FL 33156**

TITLE **D** ☐ Change ☒ Addition
NAME **Russ A. Martinez**
STREET ADDRESS **7700 N. Kendall Drive suite 804**
CITY-ST-ZIP **Miami, FL 33156**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Martha A. Sanchez, RN, BSN, MBA
Executive Director

03/14/02

(305) 275-6663

SIGNATURE:

CR2E037 (9/01)

Attachment B0058057
Document #
N21519

Miami-Dade Area Health Education Center, Inc.

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Block 11 (Attachment) Additions/Changes to Officers and Directors in 10

Title	D	Addition
Name	Francisco Quintana	
Street, Address	7700 N. Kendall Drive Suite 804	
City-St-Zip	Miami, FL 33156	

Title	D	Addition
Name	George Simpson	
Street, Address	7700 N. Kendall Drive Suite 804	
City-St-Zip	Miami. FL 33156	