FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF TYPE

Sandra B. Morthan

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9300000064 (6)

MOUNT SINAI MEDICAL CENTER PHYSICIAN-HOSPITAL OR

FILED Jan 27 1998 8:00am Secretary of State

GANIZATION, INC.			
Principal Place of Business	Mailing Address		
4300 ALTON ROAD	4300 ALTON ROAD		3. Date Incorporated or Qualified
MIAMI BEACH FL 33140	MIAMI BEACH FL 33140		01/04/1993
			4- FEI Number Applied For
2. Dringingt Diago of Divisions	20 No. 11-11-11-11-11-11-11-11-11-11-11-11-11-		65-0398755 Not Applicable
2. Principal Place of Business	2a. Mailing Address		5. Certificate of Status Desired S8.75 Additional
Suite, Apt. #, etc.	Suite, Apt. #, etc.	···	Fee Required 6. Election Campaign Financing \$5.00 May Be
22	27		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State	City & State		7. Is this nonprofit corporation a homeowners association?
Zlp Country	28	Country	Yes No No
24 25	29 3	-, '	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, Yes No
9. Name and Address of Curren		<u>ul </u>	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
		81 Name	Alyson R. Osman
SERELL, ALYSON R ESQ			dress (P.O. Box Number Is Not Acceptable)
			4300 Alton Road
MIAMI BEACH FL 33140		[83]	dieni Besch El
		84 City	Miami Beach, Fl 85 Zip Godg _
11 Supplied to 10 10 10 10 10 10 10 10 10 10 10 10 10			►L 33140
11. Pursuant to the provisions of Sections 677 5502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered stent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. Increby accept the appointment as registered agent. I am familiar with, and accept the obligation of 17.0503, Florida Statutes.			
agent. I am raminar with, and accept the splittening by Section 617.0503, Florida Statutes.			
SIGNATURE Signature, typed or printing name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D .	DELETE	1.1 TITLE	Change Addition
NAME HENKEL, ROBERT J		1.2 NAME	
STREET ADDRESS 4300 ALTON RD.		1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP	
TITLE D	DELETE	2.1 TITLE	☐ Change ☐ Addition ☐
NAME HUDSON, LARRY STREET ADDRESS 4300 ALTON ROAD		2.2 NAME	
LULIU DELOU EL COLLO		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI BEAUTH FL. 33140	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	DP X Change Addition
NAME KULVIN, STEPHEN			KULVIN, STEPHEN
STREET ADDRESS 4300 ALTON RD			300 Alton Road
CITY-ST-ZIP MIAMI BEACH FL			Miami Beach, FL 33140
TITLE DP	DELETE	AT TITLE	HIRT, FRED ⊠ Change ☐ Addition
NAME HIRT, FRED D			300 Alton Road
STREET ADDRESS 4300 ALTON ROAD			
CITY-ST-ZIP MIAMI BEACH FL 33140		4.4 CITY-ST-ZIP	liami Beach, FL 33140
TITLE D	DELETE	5.1 TITLE	Change Addition
NAME GRATZ, CHARLES D		5.2 NAME	
STREET ADDRESS 4300 ALTON ROAD		5.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI BEACH FL 33140	☐ DELETE	5.4 CITY-ST-ZIP	Characteristics
NAME ROBINSON, MORTON	☐ hereie	6.1 TITLE	Change Addition
STREET ADDRESS 4300 ALTON ROAD		6.2 NAME	
		& 2 CTDEET ADDOCCO	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP MIAMI BEACH FL 33140		6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

TGNATURE FEOURED

1/12/98

(305)674-2143