

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # 1799000003187

1. Entity Name

The Miami Medical Alliance Inc.

03 JAN 17 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

900010667539
01/23/03--01034--005 **\$1.25

2. Principal Place of Business

3196 SW 62 Ave

3. Mailing Address

3196 SW 62 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0927738

Applied For

Not Applicable

Zip

Country

33155 USA

Zip

Country

33155 USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Victoria Brewer-Anderson

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

269 NE 100 St

City

Miami Shores

FL

Zip Code

33138

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

Victoria Brewer-Anderson

(NOTE: Registered Agent signature required when reinstating)

Jan 13 '03

DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
David Carbone, Aventura Hospital
20900 Buxayne Blvd
Aventura, FL 33180

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

900010667539
01/23/03--01034--005 **\$1.25

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
Steven Sonnenreich
Mount Sinai, 4300 Alton Rd
Miami, FL 33176

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
Brian Keeley
6855 Red Road
Coral Gables, FL 33143

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
Tom Rozek
Miami Childrens, 3100 SW 62 Ave
Miami, FL 33155

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
Victoria Brewer-Anderson
269 NE 100 St
Miami, FL 33138

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

D
Allen Brenteson
8900 N. Kendall Dr.
Miami, FL 33176

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

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 on an attachment with an address with all other like empowered.

SIGNATURE:

Victoria Brewer-Anderson

1/13/03 305 579-1357

CR2E037B (12/01)

The Miami Medical Alliance, Inc.
3196 NW 62 Avenue
Miami, Florida 33155
305-579-1357

November 25, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


Re: Document #N99000003187

To Whom It May Concern:

Please find enclosed the 2002 Not-For-Profit Annual Report and our check for \$61.25. We moved in September 2001 and the report was not forwarded to our new address. We respectfully request the late fee to be waived and accept our enclosed filing.

Thank you for your cooperation in this matter.

Sincerely,


Victoria Brewer Anderson
Director