

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000087686

FILED
Nov 26, 2007
Secretary of State

Entity Name: DADE COUNTY MEDICAL CENTER, INC.

Current Principal Place of Business:

1393 SW 1ST ST.
SUITE 211
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1393 SW 1ST ST.
SUITE 211
MIAMI, FL 33135

New Mailing Address:

FEI Number: 30-0195807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSELL, ROBERTO
1393 SW 1ST ST.
SUITE 211
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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 ROSELL

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSELL, ROBERTO
Address: 1393 S.W. 1ST ST., STE. 211
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO ROSELL

PD

11/26/2007

Electronic Signature of Signing Officer or Director

Date