

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059407

Entity Name: MIAMI-DADE HEALTH, INC.

FILED  
Mar 04, 2010  
Secretary of State

**Current Principal Place of Business:**

9415 NE 6 AVE  
MIAMI SHORES, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 141799  
CORAL GABLES, FL 33114 US

**New Mailing Address:**

FEI Number: 20-4658994

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORDOVA, ANGEL D  
780 NW 42 AVENUE  
SUITE 416  
MIAMI, FL 33126 US

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

CORDOVA, ANGEL D  
782 NW 42 AVENUE  
SUITE 340  
MIAMI, FL 33126 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/04/2010

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PEREZ, ALFONSO J  
Address: 9415 NE 6 AVE  
City-St-Zip: MIAMI SHORES, FL 33138

I hereby 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 all other like empowered.

SIGNATURE: ALFONSO J. PEREZ

Electronic Signature of Signing Officer or Director

PRES

03/04/2010

Date