## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000123985

**Entity Name: MIAMI MEDICAL CARE CORPORATION** 

FILED Apr 19, 2012 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

7105 S.W. 8TH ST. SUITE 210 MIAMI, FL 33144

**Current Mailing Address: New Mailing Address:** 

2423 SW 147TH AVE. 7105 S.W. 8TH ST. SUITE 210 MIAMI, FL 33185 MIAMI, FL 33144

FEI Number: 26-1440170 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RAMIREZ, EDUARDO RAMIREZ, EDDY 2423 SW 147TH AVE. 7105 SW 8TH ST. 210 145 MIAMI, FL 33185 US MIAMI, FL 33144 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: EDDY RAMIREZ 04/19/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: RAMIREZ, EDDY

2423 SW 147TH AVE. SUITE 145 Address:

City-St-Zip: MIAMI, FL 33185

Title: PD

Name: RAMIREZ, MARIANELA 7105 SW 8TH ST STE 210 Address:

MIAMI, FL 33144 City-St-Zip:

Title: SEC

RAMIREZ, EDUARDO Name: 2423 SW 147 AVE STE 145 Address:

City-St-Zip: MIAMI, FL 33185

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.

VΡ SIGNATURE: EDDY RAMIREZ 04/19/2012