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PROFIT
OORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000024033 (1)

TAMIAMI TRAIL MEDICAL CENTER INC.

Principal Place of Business 4211 N.W. 2ND TERR MIAMI FL 33126

SIGNATURE:

Mailing Address

4211 N.W. 2ND TERR MIAMI FL 33126-5420

FILED Mar 04 1997 8:00am Secretary of State



2-28-97 (205) 888-2203

				3. Date Incorporated or Qualified 03/31/1993	3a. Date of Las 07/08/199	•
Principal Pla		2a. Mailing Address	> 57	4. FEI Number		Applied For
168 U		26 68 W.		65-0448820		Not Applicable
Suite, Apt. #]	# etc	Suite Apt. #, etc.		5. Certificate of Status Desired	4	5 Additional Required
Highe	411-F1	28 Finles 17	F1	Election Campaign Financing Trust Fund Contribution	☐ Add	00 May Be ed to Fees
	Condry >	29 330/O	Country S	8. This corporation has liability for in	intangible tax und∈] Yes No	er s. 199.032,
l 🚣 .C	9, Name and Address of Current	, L	<u></u>	10. Name and Address of New Re	gistered Agent	
FIGUEREDO, ARMANDO 68 W. 7 ST. HIALEAH FL 33010			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83			
			84 City		FL 85 2	ip Code
1. Pursaan⊢	to the provisions of Sections 607.9502	2 and 607.1508, Florida Statute	s, the above-named cor	rporation submits this statement for the p		g its registered
office or re agent 1 ag	egistered agent, or both, in the State in tamit it with, and acce <u>pt the obli</u> ga	of Florida. Such change was au ations of, Section 607,0505, Flor	uthorized by the corpora rida Statutes.	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointment	as registered
IGNATURE -	1 (M) (C)	>	HKNANDO FI	RUCKAD -	ノーシャーノー	/
	Stipratue Book Moulest have gluege clest age OF FICERS AND		Registered Agent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE	ODS IN 12
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OFFICER OR DIRECTOR