

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90390 023 ***150.00

0249607 AV

DOCUMENT # P95000054479

1. Entity Name
EAST KENDALL INVESTMENTS, INC.



Principal Place of Business
**8775 SW 92 ST
MIAMI FL 33176
US**

Mailing Address
**6855 RED ROAD, STE. 600
CORAL GABLES FL 33143**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0593165**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEHMAN, JODY ESQ.
6855 RED ROAD
STE. 600
CORAL GABLES FL 33143**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **HERNANDEZ-LICHTL, JAVIER**
STREET ADDRESS **6855 RED ROAD, STE. 600**
CITY-ST-ZIP **CORAL GABLES FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **LOPEZ-BLAZQUEZ, ANA**
STREET ADDRESS **6855 RED ROAD, STE. 600**
CITY-ST-ZIP **CORAL GABLES FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **ENRIGHT, WILLIAM F**
STREET ADDRESS **6855 RED ROAD, STE. 600**
CITY-ST-ZIP **CORAL GABLES FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **STD** ☐ Delete
NAME **GREENLEAF, WENDY**
STREET ADDRESS **6855 RED ROAD, STE. 600**
CITY-ST-ZIP **CORAL GABLES FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **7/31/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

786-662-7022

CR2E034 (10/02)

attachment



**Baptist Health
South Florida**

6855 Red Road
Coral Gables, FL 33143-3632

www.baptisthealth.net

80101928

#P9500054479

April 21, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2003 Uniform Business Report for the following corporations:

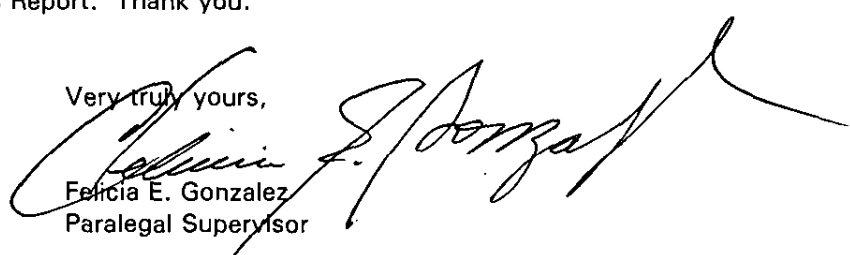
<u>Corporation</u>	<u>Filing Fee:</u>
o South Miami Hospital, Inc.	\$ 61.25
o West Kendall Professional Services, Inc.	\$150.00
o Kendall Credit and Business Services, Inc.	\$150.00
o South Miami Health Enterprises, Inc.	\$150.00
o Baptist Medical Family Services, Inc.	\$150.00
o Baptist Partners Corp.	\$150.00
o BHS Ambulatory Surgical Center at Baptist, Ltd.	\$150.00
o Kendall Professional Center, Ltd.	\$526.00
o Baptist Outpatient Services, Inc.	\$ 61.25
o Baptist Ancillary Services, Inc.	\$150.00
o East Kendall Investments, Inc.	\$150.00
o Baptist Ambulatory Services, Inc.	\$150.00
o Baptist Medical Transport Services, Inc.	\$150.00
o Baptist Medical Services Corp.	\$150.00
o BMAB East Tower, Inc.	\$150.00

Dear Sirs:

Enclosed for filing are the 2003 Uniform Business Report for the above-referenced corporations together with a check for each to cover the filing fee.

Please file each Uniform Business Report. Thank you.

Very truly yours,


Felicia E. Gonzalez
Paralegal Supervisor

Enclosures

cc: Jody Lehman, Esq.