2005 FOR PROFIT CORPORATION ANNUAL REPORT

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Feb 21, 2005 8:00 am
Secretary of State

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02162005 Chg-P CR2E034 (10/03)

DOCUMENT # P96000060186

1. Entity Name
MERCYHEALTH, INC.

Principal Place of Business	Mailing Address
1330 CORAL WAY SUITE 200 MIAMI, FL 33145 US	1330 CORAL WAY SUITE 200 MIAMI, FL 33145 US

2. Principal Place of Business	3. Mailing Address
2000 Ponce de Leon Blvd.	2000 Ponce de Leon Blvd.
Suite, Apt. #, etc.: 6th Floor	Suite, Apt. #, etc.: 6th Floor
City & State: Coral Gables, FL	City & State: Coral Gables, FL
Zip: 33134 Country: Dade	Zip: 33134 Country: Dade

4. FEI Number: 65-0787116 — Applied For / Not Applicable

5. Certificate of Status Desired: ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	GARCIA-ESTRADA, HERMINIO M.D.	2601 SW 37TH AVENUE, SUITE 803	MIAMI, FL 33133	☒
D	COSTA, GABRIEL M.D.	3659 S. MIAMI AVENUE #4001	MIAMI, FL 33133	☐
D	LOPEZ, LEONARDO V M.D.	2601 SW 37TH AVENUE, SUITE 701	MIAMI, FL 33133	☒
D	PITA, JULIO C M.D.	3659 S. MIAMI AVENUE, SUITE 6008	MIAMI, FL 33133	☒
D	MAS, RAFAEL MD	3659 S MIAMI AVENUE, SUITE 602	MIAMI, FL 33133	☒
D	DE ARMENDI, FERNANDO M.D	3661 S. MIAMI AVE., SUITE 503	MIAMI, FL 33133	☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
M	Angela Toro-Kaplan	2000 Ponce de Leon Blvd., 6th Floor	Coral Gables, FL 33134	☒	☐
C	Cecilia Mas, MD	3181 Coral Way, 5th Floor	Miami, FL 33145	☒	☐
D	Mario Almeida, MD	1150 Campo Sano Avenue, Ste. 401	Coral Gables, FL 33146	☒	☐
D	Ramon Iglesias, MD	3661 South Miami Ave., Ste. 805	Miami, FL 33133	☒	☐
D	Ricardo Girala, MD	240 Crandon Blvd., Ste. 107	Miami, FL 33149	☒	☐
D	Guillermo Gubbins, MD	3661 South Miami Ave., Ste. 1006	Miami, FL 33133	☒	☐

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: Angela Toro Kaplan 2/16/05 (305)421-6361
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 20013733

MERCY HEALTH

Number 11 - Additions/Changes to Officers and Directors

P96000060186

D Santiago Pujals, MD 3659 South Miami Avenue, Suite 5003 Miami, FL 33133	**Change**

D Carlos Moas, MD 3661 South Miami Avenue, Suite 1008 Miami, FL 33133	**Change**