

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Carole B. Matheson
Secretary of State
BUREAU OF CORPORATIONS



APPROVED
AND
FILED

DOCUMENT # **S76993** (2)

1. Corporation Name
CCC OF NORTH MIAMI BEACH, INC.

95 MAY -1 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**C/O LESLIE F. BELL
8201 BEVERLY BOULEVARD
LOS ANGELES CA 90048**

Mailng Address
**C/O LESLIE F. BELL
8201 BEVERLY BOULEVARD
LOS ANGELES CA 90048**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/30/1991		3a. Date of Last Report 02/22/1994	
4. FEI Number 65-0291486		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
6. This corporation has liability for unorganized fee under § 190.002, Florida Statutes ☐ Yes ☒ No			

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
City 24	City 29
State 25	State 30

9. Name and Address of Current Registered Agent DAVERSA, RICHARD C/O MT. SINAI COMPREHENSIVE CANCER CENTER 4300 ALTON RD. MIAMI BEACH FL 33140		10. Name and Address of New Registered Agent	
		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	
		FL 85. Zip Code	

11. Pursuant to the provisions of Sections 607 (b)(2) and (b)(7) 190B, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 (b)(2), Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D SAUCK, BERNARD M.D. 8201 BEVERLY BLVD. LOS ANGELES CA	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D BELL, LESLIE F. 8201 BEVERLY BLVD. LOS ANGELES CA	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DV FIORE, MICHAEL T. 8201 BEVERLY BLVD. LOS ANGELES CA	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	V HUNDAHL, BLAIR L. 8201 BEVERLY BLVD. LOS ANGELES CA	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	V DAVERSA, RICHARD 4300 ALTON RD MIAMI BEACH FL 33140	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY, ST, ZIP		☐ Change ☐ Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the recognition stated in Section 110 (b)(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 recorder or trustee responsible for executing this report as required by Chapter 687, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an official bond with an address.

SIGNATURE: *Leslie F. Bell* **4-20-95** **263-266-3440**
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR
Date Signature Number