

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V53486

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** SOUTH MIAMI HEALTH CENTER, INC.

**Current Principal Place of Business:**

7600 S. RED ROAD  
SUITE 124  
SOUTH MIAMI, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

7600 S. RED ROAD  
SUITE 124  
SOUTH MIAMI, FL 33143 US

**New Mailing Address:**

FEI Number: 65-0347748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HALEGUA, STEVEN  
7600 RED RD  
SUITE 124  
S MIAMI, FL 33143 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: HALEGUA, STEVEN  
Address: 7600 RED ROAD #124  
City-St-Zip: MIAMI, FL 33143

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.

SIGNATURE: STEVE HALEGUA

D

03/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date