2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710931

Entity Name: MOUNT SINAI MEDICAL CENTER OF FLORIDA, INC.

FILED Apr 04, 2025 **Secretary of State** 5206005893CC

Current Principal Place of Business: 4300 ALTON ROAD - 5TH FLOOR-WARNER BLDG

MIAMI BEACH, FL 33140

Current Mailing Address:

4300 ALTON ROAD 5TH FLOOR, WARNER BUILDING MIAMI BEACH. FL 33140 US

FEI Number: 59-0624424 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

4300 ALTON ROAD - 5TH FLOOR-WARNER BLDG MIAMI BEACH, FL 33140 US

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:

Title

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

SENIOR VP & GENERAL COUNSEL **PCEO** Title Title

Name SANTORIO, GINO R Name JAFFEE, ARNOLD Address

4300 ALTON ROAD - 5TH FLOOR-Address 4300 ALTON RD WARNER BLDG

City-State-Zip: MIAMI BEACH FL 33140

CHAIRMAN BOARD OF TRUSTEES Title

City-State-Zip:

MIAMI BEACH FL 33140

EXECUTIVE VICE PRESIDENT, CFO Name SKOLNICK, BARRY Name MENDEZ. ALEX

Address 4300 ALTON RD. Address 4300 ALTON RD.

City-State-Zip: MIAMI BEACH FL 33140 City-State-Zip: MIAMI BEACH FL 33140

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GINO R SANTORIO

PCEO

04/04/2025