

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004058

Entity Name: MIAMI SOCIETY FOR DERMATOLOGY & CUTANEOUS SURGERY, INC.

FILED
Jan 23, 2017
Secretary of State
CC5919735946

Current Principal Place of Business:

1600 NW 10TH AVE, RMSB 2023A
LOCATOR R-250
MIAMI, FL 33136

Current Mailing Address:

1600 NW 10TH AVE, RMSB 2023A
LOCATOR R-250
MIAMI, FL 33136 US

FEI Number: 20-2711931

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MORRISON, BRIAN DR.
169 NE 48 ST
MIAMI, FL 33137 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: BRIAN W MORRISON

01/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HU, SHASA DR
Address 1600 NW 10TH AVE, RMSB 2023A
 LOCATOR R-250
City-State-Zip: MIAMI FL 33136

Title VP
Name POMPA, ADRIANE DR.
Address 6705 SW 57TH AVE
 SUITE #314
City-State-Zip: CORAL GABLES FL 33143

Title TREASURER
Name MORRISON, BRIAN DR.
Address 169 NE 48 ST
City-State-Zip: MIAMI FL 33137

Title SECRETARY
Name NICHOLS, ANNA DR.
Address 1600 NW 10TH AVE, RMSB 2023A
 LOCATOR R-250
City-State-Zip: MIAMI FL 33136

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: BRIAN W MORRISON

TREASURER

01/23/2017

Electronic Signature of Signing Officer/Director Detail

Date