# 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.

DR.

SIGNATURE: FLETA BRAY

### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N05000004058

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

## 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

## Name and Address of Current Registered Agent:

BRAY, FLETA DR. 1600 NW 10TH AVE RMSB, 2023A MIAMI, FL 33136 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: FLETA BRAY     |   |                 |   |
|---------------------------|---|-----------------|---|
|                           | Electronic Signature of Registered Agent      |                 | Date  |
| Officer/Director Detail : |   |                 |   |
| Title                     | PRESIDENT                                     | Title           | VP  |
| Name                      | ROSEN AIGEN, ALYX DR.                         | Name            | BEIRNE, AUDREY MD                             |
| Address                   | 1600 NW 10TH AVE, RMSB 2023A<br>LOCATOR R-250 | Address         | 1600 NW 10TH AVE, RMSB 2023A<br>LOCATOR R-250 |
| City-State-Zip:           | MIAMI FL 33136                                | City-State-Zip: | MIAMI FL 33136                                |
| Title                     | TREASURER                                     | Title           | SECRETARY                                     |
| Name                      | BRAY, FLETA DR.                               | Name            | BELLODI-SCHMIDT, FERNANDA DR.                 |
| Address                   | 1600 NW 10TH AVE, RMSB 2023A<br>LOCATOR R-250 | Address         | 1600 NW 10TH AVE, RMSB 2023A<br>LOCATOR R-250 |
| City-State-Zip:           | MIAMI FL 33136                                | City-State-Zip: | MIAMI FL 33136                                |

Certificate of Status Desired: Yes

FILED Feb 26, 2024 Secretary of State 5332780190CC