

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11529

Entity Name: DADE COUNTY MEDICAL ASSOCIATION ALLIANCE, INC.

Current Principal Place of Business:

1501 NW N. RIVER DRIVE
MIAMI, FL 33125

Current Mailing Address:

18500 SW 132 AVE
MIAMI, FL 33177 US

FEI Number: 59-6153524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAMYAN, SANDI R
1501 NW N. RIVER DRIVE
MIAMI, FL 33125 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: SANDI R. CHAMYAN

02/24/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CHAMYAN, SANDI R
Address 18500 SW 132ND AVE
City-State-Zip: MIAMI FL 33177

Title IMMEDIATE PAST PRESIDENT
Name ASKOWITZ, JOHAN
Address 174 NE 26 DRIVE
City-State-Zip: HOMESTEAD FL 33033

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: SANDI R. CHAMYAN

PRESIDENT

02/24/2017

Electronic Signature of Signing Officer/Director Detail

Date