

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008380

Entity Name: MIAMI CHILDREN'S HEALTH SYSTEM FOUNDATION, INC.

FILED
Apr 22, 2015
Secretary of State
CC3467687958

Current Principal Place of Business:

3100 SW 62ND AVE
MIAMI, FL 33155

Current Mailing Address:

3100 SW 62ND AVE
MIAMI, FL 33155

FEI Number: 46-1784918

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ANDREWS-SINGH, APRIL ESQ
3100 SW 62ND AVE
MIAMI, FL 33155 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MAS, JUAN CARLOS ESQ.
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title EX OFFICIO DIRECTOR
Name KINI, NARENDRA MD
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title CHAIRPERSON
Name LOPEZ, MARILE
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title PRESIDENT, CEO
Name MORILLO, LUCY ESQ.
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title TREASURER
Name PEREZ-HICKMAN, FERNANDO
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title SECRETARY
Name CHOWDHURY, RAVNEET ESQ.
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title OFFICER
Name KERR, STEVEN PHD
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name DE LA VEGA, MAYI
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

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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: LUCY MORILLO, ESQ.

PRESIDENT

04/22/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KERN, DREW
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name MIYARES, ANDRIA
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name SOTO, ALEX
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name MARTIN, DAVID
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name SANTOS, MARLENE
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155

Title DIRECTOR
Name CAMPBELL-BEAVERS, EILAH
Address 3100 SW 62ND AVE
City-State-Zip: MIAMI FL 33155