

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000008380

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

**FILED**  
**May 06, 2020**  
**Secretary of State**  
**8629748786CC**

**Current Principal Place of Business:**

3100 SW 62ND AVE  
MIAMI, FL 33155

**Current Mailing Address:**

3100 SW 62ND AVE  
MIAMI, FL 33155 US

**FEI Number: 46-1784918**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MIAMI CHILDREN'S HEALTH SYSTEM, INC C/O LEGAL DEPT  
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 CHAIR  
Name PATEL, RICKY ESQ.  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

Title VICE CHAIR  
Name LOPEZ, PETER  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

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

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

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

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

Title SECRETARY  
Name DANS, JOSE  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

Title PRESIDENT, DIRECTOR  
Name BOGGS, MICHELLE  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

**Continues on page 2**

*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: MICHELLE BOGGS**

**DIRECTOR, PRESIDENT**

**05/06/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MURGADO, MARIO  
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 SACHDEVA, RAMESH MD  
Address 3100 SW 62ND AVENUE  
City-State-Zip: MIAMI FL 33155

Title DIRECTOR  
Name KHAGHAN DANIEL, MOJDEH  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

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

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

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

Title DIRECTOR  
Name REED, PERRY ANN  
Address 3100 SW 62ND AVE  
City-State-Zip: MIAMI FL 33155

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

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

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

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