

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002220

**Entity Name:** MIAMI OBSTETRICAL AND GYNECOLOGICAL SOCIETY, INC.

**Current Principal Place of Business:**

7300 SW 62ND PLACE  
4TH FLOOR  
MIAMI, FL 33143

**Current Mailing Address:**

7300 SW 62ND PLACE  
4TH FLOOR  
MIAMI, FL 33143 US

**FEI Number:** 65-0411495

**Certificate of Status Desired:** No

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

EISERMANN, JUERGEN  
7300 SW 62 PLACE  
4TH FLOOR  
MIAMI, FL 33143 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:** JUERGEN EISERMANN

03/29/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name REISMAN, TERRY MMD  
Address 7990 SW 117TH AVE., SUITE 203  
City-State-Zip: MIAMI FL 33183

Title T  
Name EISERMANN, JUERGEN MD.  
Address 7300 SW 62ND PLACE, 4TH FLOOR  
City-State-Zip: SOUTH MIAMI FL 33143

Title S  
Name MAKBIB, DIRO MD  
Address U.M DEPT. OF OBGYN, 1611 NW 12  
AVE, # 4070  
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:** JUERGEN EISERMANN

**TREASURER**

03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date