2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2015
Secretary of State
CC2150422383

DOCUMENT# 603031

Entity Name: KIDNEY & HYPERTENSION SPECIALISTS OF MIAMI, P.A.

Current Principal Place of Business:

1190 N.W. 95TH STREET
207
MIAMI, FL 33150

Current Mailing Address:

1190 N.W. 95TH STREET
207
MIAMI, FL 33150

FEI Number: 59-1360522

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PD
Name	FRANKFURT, SEYMOUR
Address	1190 N.W. 95 ST.
City-State-Zip:	MIAMI FL 33150

Title	VP
Name	MORDUJOVICH, JORGE
Address	1190 NW 95 STREET
City-State-Zip:	MIAMI FL 33150

Title	S
Name	MILES, ANNE MARIE
Address	1190 NW 95 STREET
City-State-Zip:	MIAMI FL 33150

Title	T
Name	LEMONT, MICHAEL
Address	1190 NW 95 STREET
City-State-Zip:	MIAMI FL 33150

Title	AS
Name	VELAR, ALEXANDER
Address	1190 NW 95 STREET
City-State-Zip:	MIAMI FL 33150

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE MARIE MILES SECRETARY 04/22/2015

Electronic Signature of Signing Officer/Director Detail — Date