

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000052101

**Entity Name:** FOX MEDICAL CENTER, INC.

**Current Principal Place of Business:**

2500 SW 75 AVE  
MIAMI, FL 33155

**Current Mailing Address:**

2500 SW 75 AVE  
MIAMI, FL 33155 US

**FEI Number:** 65-0338031

**Certificate of Status Desired:** Yes

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

FOX, KEVIN B  
2500 SW 75 AVENUE  
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:** KEVIN B FOX

03/24/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FOX, KEVIN B  
Address 2500 SW 75 AVE  
City-State-Zip: MIAMI FL 33155

*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:** KEVIN FOX

CEO

03/24/2020

Electronic Signature of Signing Officer/Director Detail

Date