

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT
FILED

03

DOCUMENT # P02000042272

1. Corporation Name

Advanced Medical Clinic, P.A.

03 NOV 20 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified

4/18/2002

3a. Date of Last Report

2. Principal Place of Business

21 4886 Lake Worth Road

2a. Mailing Address

26 4886 Lake Worth Road

4. FEI Number

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

23 Green Acres FL

City & State

28 Green Acres FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

County

24 33462

25

Zip

County

29 33462

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Corporate Creations Network Inc.
941 4TH STREET #200
MIAMI BEACH, FL 33139

81 Name

Corporate Creations Network Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

11380 Prosperity Farms Road #221E

83

84 City

Palm Beach Gardens

FL

85 Zip Code

33410

11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11/18/05

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
ISHAN A GUNAWARDENE
886 Lake Worth Road
Green Acres, FL 33462

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Change Addition
400025081544
11/26/03--01065--013 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, or on attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Ishan A Gunawardene

11/19/03

K. SARRIA AS ATTY IN FACT FOR:

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Advanced Medical Clinic, P.A.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. \$150 check payable to Florida Department of State

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: Valeria Cine
by V. Cine as attorney-in-fact
Name: ISHAN A GUNAWARDENE⁴
Title: Director
Date: 11/19/03