

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000039779

**FILED**  
**Nov 03, 2008**  
**Secretary of State**

**Entity Name:** CAROLA VARGAS-LEON, M.D., P.A.

**Current Principal Place of Business:**

3900 SW 126TH AVENUE  
MIRAMAR, FL 33027

**New Principal Place of Business:**

1001 N FEDERAL HWY  
311  
HALLANDALE, FL 33020 US

**Current Mailing Address:**

3900 SW 126TH AVENUE  
MIRAMAR, FL 33027

**New Mailing Address:**

1001 N FEDERAL HWY  
311  
HALLANDALE, FL 33020 US

**FEI Number:** 20-4543289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

VARGAS-LEON, CAROLA  
3900 SW 126TH AVENUE  
MIRAMAR, FL 33027 US

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

VARGAS-LEON, CAROLA M  
3900 SW 126TH AVENUE  
MIRAMAR, FL 33027 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: CAROLA M VARGAS-LEON

11/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: VARGAS-LEON, CAROLA  
Address: 3900 SW 126TH AVENUE  
City-St-Zip: MIRAMAR, FL 33027

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: VARGAS-LEON, CAROLA M  
Address: 3900 SW 126TH AVENUE  
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAROLA VARGAS LEON

DP

11/03/2008

Electronic Signature of Signing Officer or Director

Date