2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000119684

Entity Name: INVERRARY MEDICAL CENTER, P.A.

FILED Nov 12, 2010 Secretary of State

US

New Principal Place of Business: Current Principal Place of Business:

4500 INVERRARY BLVD LAUDERHILL, FL 33319

Current Mailing Address: New Mailing Address:

4500 INVERRARY BLVD LAUDERHILL, FL 33319

FEI Number: 14-2012012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A. DONNA A. WILLIAMS 1840 SW 22ND ST. 4500 INVERRARY BLVD 4TH FLOOR LAUDERHILL, FL 33319 MIAMI, FL 33145 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: DONNA A. WILLIAMS 11/12/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

FAYIGA, ADEBAYO MD Name: 4500 INVERRARY BLVD Address: City-St-Zip: LAUDERHILL, FL 33319

Title:

Name: MILLER, LOLITA I MD 4500 INVERRARY BLVD Address: LAUDERHILL, FL 33319 City-St-Zip:

Title:

WILLIAMS, DONNA ANNMARIE PA-C Name:

4500 INVERRARY BLVD Address: City-St-Zip: LAUDERHILL, FL 33319

Title:

SMALLING, PAULETTE ARNP Name: Address: 4500 INVERRARY BLVD City-St-Zip: LAUDERHILL, FL 33319

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.

VPT SIGNATURE: DONNA A. WILLIAMS 11/12/2010