

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000108530

FILED
Nov 08, 2004
Secretary of State

Entity Name: KENT AND CORMICAN, P.A.

Current Principal Place of Business:

800 EAST BROWARD BOULEVARD
SUITE 310
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

800 EAST BROWARD BOULEVARD
SUITE 310
FORT LAUDERDALE, FL 33301

New Mailing Address:

PO BOX 2527
FORT LAUDERDALE, FL 33303

FEI Number: 65-0980395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENT, NORM
800 EAST BROWARD BOULEVARD
SUITE 310
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

KENT, NORMAN
800 EAST BROWARD BOULEVARD
SUITE 310
FORT LAUDERDALE, FL 33301 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: NORMAN KENT

11/08/2004

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: PTD () Delete
Name: KENT, NORM
Address: 800 EAST BROWARD BOULEVARD, SUITE 310
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VSD () Delete
Name: CORMICAN, RUSSELL
Address: 800 EAST BROWARD BOULEVARD, SUITE 310
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NORMAN KENT

PTD

11/08/2004

Electronic Signature of Signing Officer or Director

Date