

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 600737

FILED
Nov 17, 2008
Secretary of State

Entity Name: PINELLAS UROLOGY, INC.

Current Principal Place of Business:

5747 38TH AVE. N.
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

5747 38TH AVE. N.
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-1226600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORGES, FERNANDO M.D.
5747 38TH AVE. N
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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: FERNANDO BORGES, MD

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: P () Delete
Name: BORGES, FERNANDO
Address: 5747 38TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: VP () Delete
Name: HERON, SEAN
Address: 5747 38TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: T () Delete
Name: KAPADIA, KETAN
Address: 5747 38TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: S () Delete
Name: ZHOU, SHAW
Address: 5747 38TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: FERNANDO BORGES, MD

Electronic Signature of Signing Officer or Director

PRES

11/17/2008

Date