

2008 FOR PROFIT CORPORATION REINSTATEMENT

1 of 2

DOCUMENT # 601421
 1. Entity Name
 ROTHFIELD, OKLIN, & OKLIN PA

06-07

REINSTATEMENT



FILED

08 MAR -4 PM 3:07

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business
 6805 PEMBROKE ROAD
 HOLLYWOOD, FL 33023

Mailing Address
 6805 PEMBROKE ROAD
 HOLLYWOOD, FL 33023

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2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

Same above

02282008 REIN-P CR2E098 (1/07)

4. FEI Number
 59-1274191

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROTHFIELD, BENTON
 6805 PEMBROKE ROAD
 HOLLYWOOD, FL 33023

7. Name and Address of New Registered Agent
 Name: Ronald OKLIN
 Street Address (P.O. Box Number is Not Acceptable): 6805 Pembroke Road
 City: Hollywood FL Zip Code: 33023

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* DATE: 2/28/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD OKLIN, RONALD 2220 NORTH 54TH AVENUE HOLLYWOOD, FL 33023 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROTHFIELD, BENTON 1021 N. VENETIAN DR. MIAMI BEACH, FL <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OKLIN, RICHARD 6805 PEMBROKE RD HOMESTEAD, FL 33033 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hollywood <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700120748307 03/19/08--01036--002 **308.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 2/28/08 DAYTIME PHONE #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 of 2

Oklin& Oklin DDS,PA
6805 Pembroke Road
Hollywood, Florida 33023
954-989-6950 business
954-989-6962fax
Email- 6805dental@bellsouth.net

02/28/2008
Attention: Susan Payne

I spoke with you on 02/28/2008 and informed you about the amendment form as well as the \$35.00 filing fee that was sent out on 07/17/07 and posted on 07/23/2007 check #24933 cleared the bank 07/23/2007. You informed me that you showed no record of this check and I am to send a copy of the bank statement showing that the check had been paid and you would apply that payment to the amendment for the name change. Also I never receive a notice for the annual report I have attached the annual report along with the filing fee \$300.00 that will cover 2007 and 2008 with the certificate amount of \$8.75 total amount of the check is \$308.75 check #25298.

Please call me once you have received this information. Tracy Solomon 954-989-6950 x 304

Thank you
Have a Great Day

Tracy Solomon
Office Manager