

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 602438

FILED
Feb 02, 2010
Secretary of State

Entity Name: SAFIRSTEIN & HOROWITZ, M.D'S, P.A.

Current Principal Place of Business:

4302 ALTON RD
STE 540
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

4302 ALTON RD
STE 320
MIAMI BEACH, FL 33140 US

Current Mailing Address:

4302 ALTON RD
STE 540
MIAMI BEACH, FL 33140 US

New Mailing Address:

4302 ALTON RD
STE 320
MIAMI BEACH, FL 33140 US

FEI Number: 59-1303264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOROWITZ, MICHAEL M. D.
4302 ALTON RD
STE 540
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

HOROWITZ, MICHAEL M. D.
4302 ALTON RD
STE 320
MIAMI BEACH, FL 33140 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: MICHAEL HOROWITZ M.D.

02/02/2010

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
Name: HOROWITZ, MICHAEL M.D.
Address: 4302 ALTON RD #320
City-St-Zip: MIAMI BEACH, FL

Title: ST
Name: HOROWITZ, MICHAEL E.
Address: 4302 ALTON RD #320
City-St-Zip: MIAMI BEACH, FL

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.

SIGNATURE: MICHAEL HOROWITZ M.D.

PRES

02/02/2010

Electronic Signature of Signing Officer or Director

Date