2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 602787

FILED Mar 05, 2010 Secretary of State

Entity Name: B. AMIKAM, M.D., A. ZIGHELBOIM M.D., R.E. NIEMAN, JR., M.D., AND R.M. GOODMAN,

M.D., P.A.

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

21110 BISCAYNE BLVD STE 303

AVENTURA, FL 33180 US

Current Mailing Address: New Mailing Address:

21110 BISCAYNE BLVD. 21110 BISCAYNE BLVD SUITE 303 STE 303

AVENTURA, FL 33180 US

FEI Number: 59-1322663 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:

COLODNEY, MICHAEL 626 NE 124TH ST. N. MIAMI, FL 33161 US RAMIREZ, CARLOS 2525 PONCE DE LEON BLVD. 5TH FLOOR CORAL GABLES, FL 33134 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: CARLOS RAMIREZ 03/05/2010

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: MD

Name: NEIMAN, ROLAND

Address: 21110 BISCAYNE BLVD 303 City-St-Zip: AVENTURA, FL 33180

Title: MD

 Name:
 GOODMAN, RICHARD

 Address:
 21110 BISCAYNE BLVD 303

 City-St-Zip:
 AVENTURA, FL 33180

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: RICHARD M. GOODMAN MD 03/05/2010