

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 697295

FILED
Jun 30, 2011
Secretary of State

Entity Name: GONZALO A. AGUILAR, M.D., P.A.

Current Principal Place of Business:

580 WEST EIGHTH
SUITE 802
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

580 WEST EIGHTH
SUITE 6001
JACKSONVILLE, FL 32209 US

Current Mailing Address:

C/O GONZALO A. AGUILAR, M.D.
1833 BOULEVARD, SUITE 512
JACKSONVILLE, FL 32206

New Mailing Address:

580 WEST EIGHTH
SUITE 6001
JACKSONVILLE, FL 32209 US

FEI Number: 59-2110476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUILAR, GONZALO A., M.D.
1833 BOULEVARD, SUITE 512
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

AGUILAR, GONZALO A., M.D. P.A.
580 WEST 8TH STREET
SUITE 6001
JACKSONVILLE, FL 32209 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: GONZALO A. AGUILAR M.D.

06/30/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR
Name: AGUILAR, GONZALO A.
Address: 1750 RIVER BLUFF ROAD N.
City-St-Zip: JACKSONVILLE, FL 32211 US

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: GONZALO A. AGUILAR

DR

06/30/2011

Electronic Signature of Signing Officer or Director

Date