

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F18339

**FILED**  
**Dec 14, 2007**  
**Secretary of State**

**Entity Name:** THOMAS G. SHERMAN, P.A.

**Current Principal Place of Business:**

90 ALMERIA AVE.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

908 ALMERIA AVE.  
CORAL GABLES, FL 33134

**New Mailing Address:**

90 ALMERIA AVE.  
CORAL GABLES, FL 33134

**FEI Number:** 59-2060538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHERMAN, THOMAS G  
90 ALMERIA AVE.  
CORAL GABLES, FL 33134 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:** THOMAS G SHERMAN

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: DP ( ) Delete  
Name: SHERMAN, THOMAS G  
Address: 90 ALMERIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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:** THOMAS G SHERMAN

P

12/14/2007

Electronic Signature of Signing Officer or Director

Date