2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G16303

Entity Name: KOZYAK TROPIN & THROCKMORTON, P.A.

FILED Jan 30, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

200 S. BISCAYNE BLVD. 2525 PONCE DE LEON BLVD.

SUITE 2800 9TH FLOOR

MIAMI., FL 33131 MIAMI,, FL 33134 US

Current Mailing Address: New Mailing Address:

200 S. BISCAYNE BLVD. 2525 PONCE DE LEON BLVD.

9TH FLOOR SUITE 2800

MIAMI,, FL 33131 US MIAMI, FL 33134 US

FEI Number: 59-2240304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KOZYAK, JOHN W. KOZYAK, JOHN W 200 S. BISCAYNE BLVD. 2525 PONCE DE LEON BLVD. 9TH FLOOR **SUITE 2800**

MIAMI, FL 33131 US MIAMI, 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: JOHN W. KOZYAK 01/30/2006

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

KOZYAK, JOHN W, KOZYAK, JOHN W., Name: Name: 9840 SW 63RD CT 9840 SW 63RD CT Address: Address: City-St-Zip: MIAML FL City-St-Zip: MIAMI, FL 33156

VD Title: VD (X) Change () Addition Title: () Delete TROPIN, HARLEY S., Name: TROPIN, HARLEY S., Name:

5845 SW 93 ST 5845 SW 93 ST Address: Address: MIAMI, FL MIAMI, FL 33156 City-St-Zip: City-St-Zip:

Title: Title: () Delete SD (X) Change () Addition THROCKMORTON, CHARLE, S.W. THROCKMORTON, CHARLE, S.W. Name: Name:

10650 S.W. 68TH AVENUE 10005 SW 63RD PLACE Address Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33156

Title: () Delete Title: (X) Change () Addition

HARTMANN, KENNETH R HARTMANN, KENNETH R Name: Name: Address: 113605 SW 60 AVE Address: 11360 SW 60 AVE City-St-Zip: City-St-Zip: MIAMI, FL 33156 MIAMI, FL 33156

Title: Title: () Delete () Change () Addition

MCQUILKIN, GAIL A Name: Name: 1521 ALTON RD 545 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN W. KOZYAK DP 01/30/2006

Electronic Signature of Signing Officer or Director

Date