

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# H75734

**FILED**  
**Oct 28, 2010**  
**Secretary of State**

**Entity Name:** MURAD K. THAKUR, B.D.S., P.A.

**Current Principal Place of Business:**

5480 CURRY FORD RD  
ORLANDO, FL 32812 US

**New Principal Place of Business:**

**Current Mailing Address:**

5480 CURRY FORD RD  
ORLANDO, FL 32812 US

**New Mailing Address:**

**FEI Number:** 59-2629663

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MURAD THAKUR  
5480 CURRY FORD RD  
ORLANDO, FL 32812 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:** SOVANA THAKUR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** THAKUR, MURAD K.  
**Address:** 9905 LAKE GEORGIA DRIVE  
**City-St-Zip:** ORLANDO, FL 32817

**Title:** OFF  
**Name:** SOVANA, THAKUR  
**Address:** 9905 LAKE GEORGIA DRIVE  
**City-St-Zip:** ORLANDO, FL 32817

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:** SOVANA THAKUR

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OFF

10/28/2010

\_\_\_\_\_  
Date