## 2010 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P0000001362

Entity Name: BAY AREA MEDICAL CLINIC, P.A.

FILED Nov 01, 2010 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

37900 DAUGHTERY ROAD ZEPHYRHILLS, FL 33541

Current Mailing Address: New Mailing Address:

PO BOX 48589 TAMPA, FL 33646

FEI Number: 59-3616387 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SYED, SAFDAR A 37900 DAUGHTERY ROAD ZEPHYRHILL, FL 33541 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: SYED A SAFDAR

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: SAFDAR, SYED A MD Address: 37900 DAUGHTERY ROAD City-St-Zip: ZEPHYRHILL, FL 33541

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: SYED A SAFDAR P 11/01/2010