2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P00000056094

Entity Name: MEDICAL COMMUNICATION SPECIALISTS, INC.

Current Principal Place of Business:

1312 NW 7 STREET
BOYNTON BEACH, FL 33426

New Principal Place of Business:

1312 NW 7 STREET
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

PO BOX 740242
BOYNTON BEACH, FL 334740242

New Mailing Address:

1312 NW 7 STREET
BOYNTON BEACH, FL 33426 US

FEI Number: 65-1015509 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOKREIN, CAROLE
1312 NW 7TH ST
BOYNTON BEACH, FL 33426 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: CAROLE HOKREIN
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: D ( ) Delete
Name: HOKREIN, CAROLE
Address: 1312 NW 7TH STREET
City-St-Zip: BOYNTON BEACH, FL 33426

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: CAROLE HOKEIN D 04/16/2009
Electronic Signature of Signing Officer or Director Date