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APPLICATION FOR



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000058909

1. Corporation Name

REYNALDO F. MULINGTAPANG, M.D., P.A.

FILED

02 OCT 28 AM 10:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1615 PASADENA AVE S., STE 300
S PASADENA FL 33707

~~603 SEVENTH ST SOUTH~~
~~SUITE 400~~
~~SAINT PETERSBURG FL 33701~~



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

06/16/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1615 PASADENA AVE S., STE 300

5. FEI Number

59-3654762

Applied For

City & State

City & State

ST PETERSBURG, FL

Not Applicable

Zip

Country

Zip

Country

33707

USA

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	MULINGTAPANG, REYNALDO F MD	1615 PASADENA AVE S., STE 300	S PASADENA FL 33707

500008629175
10/28/02--01098--022 **150.00

OL URG TO

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MULINGTAPANG, REYNALDO
603 SEVENTH ST SOUTH
SAINT PETERSBURG FL 33701

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State FL
	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

Reynaldo F. Mulingtapang
REGISTERED AGENT MUST SIGN

Date

Oct 24, 2002

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Reynaldo F. Mulingtapang
REGISTERED AGENT MUST SIGN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Oct 24, 2002 727-381-9696

CR2EC040 (8/02)

D. M. M. M.

October 24, 2002

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

RE: FEI Number # 59-3654762

Dear Sir/Madam:

I am writing this letter to request waiver of the reinstatement fee. I or my corporation did not receive any uniform business report notices. I've checked my mails and files and could not see any previous reports sent to me.

After speaking with your representative over the phone, I've realized what created the problem, and why I haven't received any notices. The mailing address that the notices were sent was my old business address of : 603 Seventh St. South, Suite 400 St Petersburg, FL 33701 rather than my present principal place of business which is 1615 Pasadena Ave S., Ste 300, St Petersburg FL 33707. These notices were never forwarded to my principal address from the old mailing address.

I've corrected this error and changed the mailing address to my present place of business in the application. I anticipate that I would be in full compliance in the future.

I'm hoping that you can grant me this waiver and also reinstate my corporation expeditiously.

Respectfully yours,

R. Mulingtapang
Reynaldo F. Mulingtapang, MD, PA
President