2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000065064

Entity Name: INJURY INSTITUTE OF FLORIDA, INC.

FILED Oct 23, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1380 NE MIAMI GARDENS DRIVE 140 NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

P.O. BOX 801440 MIAMI, FL 33280

FEI Number: 58-2638585 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANDREW, FRANK M.D. 1380 NE MIAMI GARDENS DRIVE NORTH MIAMI BEACH, FL 33179 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: ANDREW FRANK

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: DR. () Delete Title: P (X) Change () Addition

 Name:
 FRANK, ANDREW
 Name:
 FRANK, ANDREW

 Address:
 150 NW 168 ST., #214
 Address:
 1775 CALLAIS DR #5

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33169
 City-St-Zip:
 MIAMI BEACH, FL 33141

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: ANDREW FRANK P 10/23/2008