2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# P00000068391

Entity Name: HEMANT PAINTER, M.D., P.A.

Current Principal Place of Business:

7232 W. SANDLAKE RD
STE 102
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

9049 HERITAGE BAY CIRCLE
ORLANDO, FL 32836

New Mailing Address:

FEI Number: 59-3658621 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: SPIEGEL & UTRERA P.A

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: PSTD ( ) Delete
Name: PAINTER, HEMANT MD
Address: 9049 HERITAGE BAY CIRCLE
City-St-Zip: ORLANDO, FL 32836

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: HEMANT PAINTER MD PSTD 03/25/2009

Electronic Signature of Signing Officer or Director — Date