

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000087615

Entity Name: JOSE L. AVILA, MD, PA

FILED
Oct 26, 2004
Secretary of State

Current Principal Place of Business:

4909 SW 36TH AVENUE
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

413 TAMARIND DRIVE
HALLANDALE BEACH, FL 33009

Current Mailing Address:

4909 SW 36TH AVENUE
FT. LAUDERDALE, FL 33312

New Mailing Address:

413 TAMARIND DRIVE
HALLANDALE BEACH, FL 33009

FEI Number: 65-1054586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVILA, JOSE L
4909 S.W. 36 AVENUE
FT. LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

AVILA, JOSE L
413 TAMARIND DRIVE
HALLANDALE BEACH, FL 33009 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: JOSE L. AVILA

10/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AVILA, JOSE L
Address: 4909 S.W. 36TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AVILA, JOSE L
Address: 413 TAMARIND DRIVE
City-St-Zip: HALLANDALE BEACH, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE L. AVILA

PD

10/26/2004

Electronic Signature of Signing Officer or Director

Date