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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAR -9 AM 8:00

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P01000075720

1. Corporation Name

MEDCOVE, INC.

**REINSTATEMENT 03-04**

2. Principal Office Address

8368 NW 143 ST

Suite, Apt. #, etc.

3. Mailing Office Address

8368 NW 143 ST

Suite, Apt. #, etc.

City & State

MIAMI LAKES, FL

City & State

MIAMI LAKES, FL

Zip

33016

Country

USA

Zip

33016

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

8-1-01

5. FEI Number

65-1128643

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DARIN A DIBELLO

Street Address (P.O. Box Number is Not Acceptable)

1550 MADRUGA AVE

Suite, Apt. #, Etc.

327

City

CORAL GABLES

State

FL

Zip Code

33146

MRD

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

3/2/2004

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	ALVAREZ, ALEJANDRO	8368 NW 143 ST	MIAMI LAKES, FL 33016
V	HERNANDEZ, LEDIA	4805 SW 152 CT UNIT H	MIAMI, FL 33185
ST	MANRESA, ALEXANDER	8368 NW 143 ST	MIAMI LAKES, FL 33016

10. 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:

Alex Manresa ALEXANDER MANRESA

3-2-04

305-698-6223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED81 (01/04)

202  
**MEDCOVE**  
MEDICAL BILLING SERVICES

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

March 2, 2003

To whom it may concern,

I am writing this letter to discuss the events surrounding MedCove's need to reinstate and why I feel, MedCove does not owe any reinstatement fees.

**February 20, 2003:** The 2003 Uniform Business Report(refer to copy 1) was completed and sent in with the \$150 fee.

**February 27, 2003:** The \$150 check was cashed (refer to copy 2) and the report was returned with a letter stating that there was not a registered agent designated on the report.

**March 3, 2003:** I called and spoke with a representative and let them know that the registered agent should have been changed to Darin A DiBello in 2002. I sent a copy of the 2002 Uniform Business Report (refer to copy 3) as proof of this statement. Therefore, the 2003 Uniform Business Report should not have been rejected.

**Present:** I never received the UBR for 2004 and when I went online to download it, the status of the company was listed as inactive. I spoke with a representative on the phone and I was told to fill out the Corporation Reinstatement and provide a copy of the 2003 UBR and a letter explaining why MedCove should not have to pay reinstatement fees.

I feel that the 2003 Uniform Business Report rejection is an error on your part. Therefore, I feel that MedCove should not have to pay any reinstatement fees since the 2003 UBR was completed properly.

Enclosed please find:

1. Copy of the UBR from 2003
  2. Copy of my cashed check from the 2003 UBR
  3. Copy of the UBR from 2002 showing the registered agent Corporation Reinstatement Form
- A check for \$150 for the UBR for 2004

If you have any questions, please feel free to call me to clear this matter up at (305)698-6272.

Thank you,

*Alex Manresa*

**Alexander Manresa**  
Secretary, MedCove, Inc.