2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000113635

Entity Name: MID FLORIDA INTERNAL MEDICINE GROUP, P.A.

FILED Nov 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

818 MAIN LANE 11036 BRIDGE HOUSE ROAD ORLANDO, FL 32801 WINDEMERE, FL 34786

Current Mailing Address: New Mailing Address:

P O BOX 929 11036 BRIDGE HOUSE ROAD WINDERMERE, FL 34786 WINDEMERE, FL 34786

FEI Number: 59-3757520 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:

MUTTREJA, SANJAY P
1717 KNOTTING HILL DR.
ORLANDO, FL 32835 US

MUTTREJA, SANJAY P
11036 BRIDGE HOUSE ROAD
WINDEMERE, FL 34786 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: SANJAY P. MUTTREJA 11/27/2007

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: DPST () Delete Title: (X) Change () Addition Name: MUTTREJA, SANJAY P Name: MUTTREJA, SANJAY P 1717 KNOTTING HILL DR. Address: 11036 BRIDGE HOUSE ROAD Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: WINDEMERE, FL 34786

Title: DVPT () Delete Title: DVPT (X) Change () Addition Name: MUTTREJA, SUMAN Name: MUTTREJA, SUMAN

Address: 1717 KNOTTING HILL DR Address: 11036 BRIDGE HOUSE ROAD City-St-Zip: ORLANDO, FL 32825 City-St-Zip: WINDEMERE, FL 34786

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: SANJAY P MUTTREJA D 11/27/2007