## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000013162

Entity Name: PROFESSIONAL MEDICAL CONCEPTS, INC.

FILED Oct 10, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	TERBURY DR ATER, FL 337				
Current Mailing Address:			New Mailing Address:		
	TERBURY DR ATER, FL 337	•			
FEI Number:	: 80-8037095	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
1419 CAN	ON, SCOTT P TERBURY DR ATER, FL 337				
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: SCOTT F	P. KNOWLSON			
	Electro	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did ng Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( KNOWLSON, S 1419 CANTER CLEARWATER	BURY DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT P KNOWLSON P 10/10/2006