2011 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2011
Secretary of State

DOCUMENT# P02000054032

Entity Name: ALEXANDRA D. WILLIAMS, M.D., P.A.

Current Principal Place of Business:

2901 NE 39TH CT
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

1 WEST SAMPLE ROAD
SUITE 104
POMPANO BEACH, FL 33064

Current Mailing Address:

2901 NE 39TH CT
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 75-3057312 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, JEFFREY L
54 NE FOURTH AVE
DELRAY BCH, FL 33483 US

Name and Address of New Registered Agent:

COHEN, JEFFREY L
109 SE FIFTH AVE
SUITE 200
DELRAY BCH, FL 33483 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: JEFFREY L COHEN 10/19/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: MD
Name: WILLIAMS, ALEXANDRA D MD
Address: 2901 NE 39TH CT.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

I hereby 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 all other like empowered.

SIGNATURE: ALEXANDRA D WILLIAMS OFFI 10/19/2011
Electronic Signature of Signing Officer or Director Date