2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000057928

Entity Name: MURALI M. ANGIREKULA, M.D., P.A.

FILED Oct 06, 2005 Secretary of State

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

4065 N LECANTO HWY 100 BEVERLY HILLS, FL 34665

New Mailing Address: Current Mailing Address:

PO BOX 641506 BEVERLY HILLS, FL 34464

FEI Number: 02-0602865 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:

ANGIREKULA, MURALI M.D. ANGIREKULA, MURALI M.D. 1677 N. DEMAGIO PATH 1677 N. DEMAGGIO PATH HERNANDO, FL 34442 HERNANDO, FL 34442

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: MURALI M. ANGIREKULA 10/06/2005

> 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:

() Delete Title: Title: (X) Change () Addition

ANGERELAH, MARLIA DR ANGIREKULA, MURALI M DR Name: Name:

PO BOX 641506 Address: PO BOX 641506 Address:

City-St-Zip: BEVERLY HILLS, FL 34464 City-St-Zip: BEVERLY HILLS, FL 34464

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 Statutés. 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: KAREN PHILLIPS, R.N. 10/06/2005 R.N