2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000076704

Entity Name: N. CHANDRAMOHAN, M.D., P.A.

FILED Oct 11, 2005 Secretary of State

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

 10 N EUSTIS ST
 32845 RADIO ROAD

 EUSTIS, FL 32726
 SUITE 102

LEESBURG, FL 34788

Current Mailing Address: New Mailing Address:

P.O. BOX 1316 EUSTIS, FL 32727

FEI Number: 13-4204087 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:

CHANDRA MOHAN, N MD
8008 SAINT JAMES WAY
MOUNT DORA, FL 32757 US

CHANDRAMOHAN, N MD
8008 SAINT JAMES WAY
MOUNT DORA, FL 32757 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: N. CHANDRAMOHAN, MD 10/11/2005

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:

Title: D () Delete Title: () Change () Addition

 Name:
 CHANDRAMOHAN, N. MD
 Name:

 Address:
 P.O. BOX 1316
 Address:

 City-St-Zip:
 EUSTIS, FL 32727
 City-St-Zip:

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 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: N CHANDRAMOHAN, MD D 10/11/2005