

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000093041

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** ALBERTO FISCHZANG DMD, P.A.

**Current Principal Place of Business:**

1601 NORTH HIATUS RD.  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

**Current Mailing Address:**

19111 SENECA AV.  
WESTON, FL 33332

**New Mailing Address:**

FEI Number: 32-0029557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FISCHZANG, ALBERTO D.M.D.  
19111 SENECA AV.  
WESTON, FL 33332 US

**Name and Address of New Registered Agent:**

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: ALBERTO FISCHZANG

\_\_\_\_\_  
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:**

Title: DP  
Name: FISCHZANG-LEVY, ALBERTO  
Address: 19111 SENECA AV  
City-St-Zip: WESTON, FL 33332

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: ALBERTO FISCHZANG

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

04/30/2010

\_\_\_\_\_  
Date