

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000117213

Entity Name: GERVASIO A. LAMAS, M.D., P.A.

FILED
Oct 24, 2006
Secretary of State

Current Principal Place of Business:

4300 ALTON ROAD
SUITE 207
MIAMI BEACH, FL 33140

Current Mailing Address:

4300 ALTON ROAD
SUITE 207
MIAMI BEACH, FL 33140

New Principal Place of Business:

881 OCEAN DRIVE
SUITE 6H
KEY BISCAYNE, FL 33149

New Mailing Address:

881 OCEAN DRIVE
SUITE 6H
KEY BISCAYNE, FL 33149

FEI Number: 90-0099263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRENECHE, MICHAEL
14307 SW 100 LANE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

LUCAS, HOWARD
2121 PONCE DE LEON BOULEVARD
11TH FLOOR
CORAL GABLES, FL 33134 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: HOWARD LUCAS

10/24/2006

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: D () Delete
Name: LAMAS, GERVASIO A MD
Address: 4300 ALTON ROAD, SUITE 207
City-St-Zip: MIAMI BEACH, FL 33140

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LAMAS, GERVASIO A MD
Address: 881 OCEAN DRIVE APT 6H
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: SEC () Change (X) Addition
Name: LAMAS, DANIELA J
Address: 881 OCEAN DRIVE APT 6H
City-St-Zip: KEY BISCAYNE, FL 33149 US

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: GERVASIO A LAMAS MD

PRES

10/24/2006

Electronic Signature of Signing Officer or Director

Date