


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000002418	
1. Entity Name CONTINUACARE HOSPITALIST NETWORK, INC.	

FILED  
05 OCT 12 PM 12:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130	Mailing Address 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130
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2. Principal Place of Business 7200 Corporate Center Dr Suite 600 Miami, FL 33126 U.S.	3. Mailing Address 7200 Corporate Center Drive Suite 600 Miami, FL 33126 U.S.
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09262005 REIN-P CR2E098 (6/04)

4. FEI Number 41-2073664	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PFENNIGER, RICHARD C JR 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition See Attached
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS HOLT, JANET 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100060728871 10/18/05--01086--001 **2063.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HEALY, PATRICK M 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V IZQUIRDO, LUIS H 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS SMITH, KAREN A 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition for 10/17
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FROST, PHILLIP MD 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	10/6/05 Date	305.500.2000 Daytime Phone #
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**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**Title** T ☐ Change ☒ Addition  
**Name** FERNANDEZ, FERNANDO  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** V ☐ Change ☒ Addition  
**Name** ROSELLO, GEMMA  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** V ☐ Change ☒ Addition  
**Name** LOPEZ, HOLLY  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** D ☐ Change ☒ Addition  
**Name** STRAIT, MARVIN  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** D ☐ Change ☒ Addition  
**Name** CRESCI, ROBERT  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** D ☐ Change ☒ Addition  
**Name** FLANZRAICH, NEIL  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126

**Title** D ☐ Change ☒ Addition  
**Name** NUDEL, JACK  
**Street Address** 7200 CORPORATE CENTER DRIVE  
**City-St-Zip** MIAMI, FLORIDA 33126