

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000025540

Entity Name: T & E MEDICAL GROUP, P.A.

FILED
Nov 09, 2004
Secretary of State

Current Principal Place of Business:

1933 SW 27TH AVE STE 201
MIAMI, FL 33145

New Principal Place of Business:

1350 SW 57 AVE.
212
MIAMI, FL 33144

Current Mailing Address:

1933 SW 27TH AVE STE 201
MIAMI, FL 33145

New Mailing Address:

1350 SW 57 AVE.
212
MIAMI, FL 33144

FEI Number: 11-3680871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALES, JORGE L
1933 SW 27TH AVE STE 201
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

MIRABAL, FRANKLIN
1350 SW 57 AVE.
212
MIAMI, FL 33144 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: FRANKLI MIRABAL

11/09/2004

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: ALFONSO, TERESA B
Address: 1933 SW 27TH AVE STE 201
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: ARMAS, EDDI
Address: 1933 SW 27TH AVE STE 201
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: ALFONSO, TERESA B
Address: 1350 SW 57 AV. SUITE 212
City-St-Zip: MIAMI, FL 33144

Title: MD (X) Change () Addition
Name: ARMAS, EDDIE
Address: 1350 SW 57 AVE SUITE 212
City-St-Zip: MIAMI, FL 33144

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: TERESA B. ALFONSO MD

MD

11/09/2004

Electronic Signature of Signing Officer or Director

Date