


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000027426		
1. Entity Name LEON PROPERTIES AT DORSCHER PLAZA, INC.		

Principal Place of Business 988 MONTCLAIR CIRCLE APOPKA, FL 32202	Mailing Address 988 MONTCLAIR CIRCLE APOPKA, FL 32202
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2. Principal Place of Business 9888 Montclair Circle Suite, Apt. #, etc.	3. Mailing Address 9888 Montclair Circle Suite, Apt. #, etc.
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City & State Apopka FL	City & State Apopka FL
Zip 32703	Zip 32703
Country USA	Country USA

FILED
04 NOV 29 PM 2: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
6-23-04 90001-014 B 150⁰⁰

10202004 REIN-P CR2E098 (6/04)

4. FEI Number 51-0454177	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LEON, RAQUEL 9888 MONTCLAIR CIR APOPKA, FL 32202	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 32703
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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 _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, 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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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
Date 11-5-04 Daytime Phone # 407 532-2826



2700 SUNTRUST FINANCIAL CENTRE
401 EAST JACKSON STREET
TAMPA, FLORIDA 33602-5841

(813) 314-6702
FAX: (813) 314-6802
CHARLES.KLUG@RUDEN.COM

November 10, 2004

VIA: FEDERAL EXPRESS

Secretary of State of Florida
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

Re: Leon Properties at Dorscher Plaza, Inc. f/k/a Precision Medical Services, Inc.
2004 Uniform Business Report – Document #P03000027426
Our File 44893-0002

Dear Sir or Madam:

Enclosed please find the original 2004 For Profit Corporation Reinstatement for Leon Properties at Dorscher Plaza, Inc. f/k/a Precision Medical Services, Inc. (the "Corporation") for filing with the State of Florida, Division of Corporations reinstating the Corporation. On June 21, 2004, our firm forwarded the original 2004 Uniform Business Report for Precision Medical Services, Inc. for filing with the appropriate filing fee. We are requesting any additional fees be waived as neither our firm nor our client has received any correspondence requesting additional information in order to process the filing but, rather, it was through a telephone call to the Department of State wherein we became aware of the reasons for the Administrative Dissolution.

We appreciate your assistance with regard to this matter. In the meantime, please feel free to give me a call should you have any questions regarding this correspondence or the 2004 For Profit Reinstatement enclosed herein.

Sincerely,

A handwritten signature in cursive script, appearing to read "Charles E. Klug, Jr.", written over the typed name.

Charles E. Klug, Jr.

CEK:amb
Enclosures
cc: Maurizio Leon