

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000098346

**FILED**  
**Oct 14, 2004**  
**Secretary of State**

**Entity Name:** ADVANCED INTEGRATED MEDICAL CENTERS, INC

**Current Principal Place of Business:**

1655 EAST OAKLAND PARK BLVD.  
OAKLAND PARK, FL 33334 US

**New Principal Place of Business:**

**Current Mailing Address:**

11381 AVERY ROAD  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

1655 EAST OAKLAND PARK BLVD.  
OAKLAND PARK, FL 33334

**FEI Number:** 20-0245742

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOUGHERTY, THOMAS ESQ  
772 U.S. HIGHWAY ONE - SUITE 200  
NORTH PALM BEACH, FL 333408 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: \_\_\_\_\_

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: P/SC ( ) Delete  
Name: TOIA, THOMAS P  
Address: 11381 AVERY ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS P TOIA

PRES

10/14/2004

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

\_\_\_\_\_  
Date